



PORT COQUITLAM
PROFESSIONAL
FIREFIGHTERS CHARITABLE
SOCIETY

Scholarship Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Phone: _____ Email _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO

College: _____ Address: _____

Start: _____ End: _____ Degree: _____

Activities

Please briefly list community-based activities/initiatives:

Disclaimer and Signature

I certify that I have attached the following:

1. Request letter including short personal biography and future education plans (signed by applicant)
2. Photo release for website and social media use (signed by applicant or guardian)
3. Proof of registration in a post-secondary program
4. Receipt with applicant's name on it
 - a. Funds will be distributed approx. one month prior to start date

Signature: _____ Date: _____



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Qualifications for Receiving a Scholarship

The selection committee is looking for individuals who are all-around good students, who are dedicated to making their school and community a better place. The recipient does not have to be an all-star in the classroom or on a sports team, but they should be passionate about volunteering or helping their peers and others.

To qualify for the Port Coquitlam Professional Firefighters Charitable Society (PCPFCS) **\$1000**

Scholarship, a student must meet the following criteria:

- Resident of Port Coquitlam
- Graduating grade 12 student from Riverside or Terry Fox Secondary School
- Plans to attend recognized post-secondary institution for career advancement course
- Demonstrated school involvement and dedication to community
- Plans to use the scholarship money for tuition within one year of graduation

Please ensure to include signed application, short personal biography, photo release for use on the PCPFCS website and social media, proof of registration and receipt with applicant's name on it. Selections will be made in early- or mid-June.



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Photo Release Form

I _____ with a mailing address of _____,
City of Port Coquitlam, Province of British Columbia (PCPFCS; the “Releasor”) grant permission
and consent to the Port Coquitlam Professional Firefighters Charitable Society (the “Releasee”) for the use of the following photograph(s) as identified below for the presentation under any legal condition, including but not limited to: publicly, copyright purposes, illustration, web content:

Photo: PCPFCS Scholarship Cheque Presentation

Payment

- I understand that there shall be no payment for this release

Royalties

- I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Revocation

- I understand that I may revoke this authorization at any time by notifying the Releasee in writing. The revocation will not affect any actions taken before the receipt of this written notification. Images will be stored in a secure location and only authorized staff will have access to them.

Releasor’s Signature _____ Date _____

Print Name _____ Date _____

Releasee’s Signature _____ Date _____

Print Name _____ Date _____