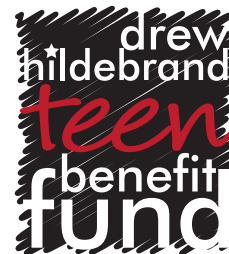


## Drew Hildebrand "It takes courage to change" Scholarships



The Drew Hildebrand Teen Benefit Fund is pleased to announce the inaugural year of the Drew Hildebrand "It takes courage to change" Scholarships. These scholarships recognize and reward positive change through individual scholarships of up to \$5,000 for post secondary education and/or training programs.

It can be an extraordinary challenge for at-risk teens to take the courageous and consistent actions to turn their backs on risky behaviours. The goal of the Drew Hildebrand "It takes courage to change" Scholarships is to encourage at-risk teens to take the initiative to find the path to a better life, and to recognize and reward graduating teens in Peel and Halton high schools who have demonstrated positive change and turnaround initiative.

### Eligibility:

To be eligible for consideration for a scholarship, applicants must be a graduating high school teen within the Peel and Halton regions who is planning to enroll in a qualifying program for the fall and/or winter term of the coming academic year.

### Eligible Programs:

- Bachelor degrees
- College, Trade or Vocational School programs

*Non-credit and home study courses are not covered under the scholarship.*

### Criteria:

The applications will be judged by the following criteria:

1. Completion of the application form and all application requirements. Incomplete applications will not be considered.
2. Expressive submission:
  - a. A letter (no more than 2 pages, single-sided, double-spaced 8.5x11" page that is typewritten in size 12 font; include name, address and phone number in the upper left of the page) that outlines how the teen has demonstrated personal turnaround initiative and what that has meant to his or her life, and
  - b. a letter (no more than 2 pages), poem, piece of artwork, or a song that expresses the applicant's thoughts or viewpoints about how our society can better deal with and prevent teen violence, which could include an anti violence slogan or poster for instance. Or, a letter (no more than 2 pages) that outlines a new student fundraising idea for the DHTBF.
3. Two references – one from a teacher/guidance counselor or from a member of the DHTBF volunteer committee, and one from outside the school, preferably a non family member.
4. A current official transcript of the applicant's grades, certified by the high school must accompany the application.

### Additional criteria:

- Applicants must be a Canadian citizen planning to attend school in the 2010/2011 school year.
- Monies awarded are sent to the educational institutions, and are applied to tuition costs. Maximum award is a one-time award of up to \$5,000 in Canadian dollars.
- Applicant agrees that his/her name shall be published on the DHTBF website and on future materials for the charity, and agrees to provide other information and documentation as may be reasonably requested by the DHTBF.
- If the recipient does not graduate from high school, does not enroll in a qualifying post secondary program, or if the DHTBF learns that information has erroneously submitted, the award will be forfeited and awarded to an alternate recipient.
- Substitutions or transfers are not permitted.

### Judging:

Completed applications will be judged by the DHTBF Board of Directors, whose decision will be final in all respects. Where appropriate, family needs and income will also be taken into consideration.

### Completed applications should be mailed to:

Drew Hildebrand Teen Benefit Fund  
2979 Picton Place, Mississauga, ON L5M 5S7

*The DHTBF is not responsible for lost, late, misdirected, mutilated, incomplete, illegible applications or postage-due mail. All applications, including expressive submissions become the property of the DHTBF and will not be returned or acknowledged. The DHTBF reserves the right to interpret these rules and make decisions concerning the award, acceptance and use of scholarships in situations not covered by these rules. The DHTBF reserves the right to amend these rules from time to time as reasonably necessary.*

### The deadline for applications is March 30th, 2010.

Application packages are available on the web site at [www.dhtbf.com](http://www.dhtbf.com). Recipients will be notified on or about June 1st, 2010.



# Application Form

(The following information is for use by the selection committee only.)

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Other Number \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Occupation \_\_\_\_\_ Family Income \_\_\_\_\_

# of dependents at home and their ages \_\_\_\_\_

School / Grade / Year Started \_\_\_\_\_

Describe how you completed/about to complete your 40 hours of community service \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Desired post-secondary program \_\_\_\_\_

Name of educational institution \_\_\_\_\_

Tuition costs for this program \_\_\_\_\_

Have you already applied to this program? \_\_\_\_\_

Have you applied for other scholarships or student loans? If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

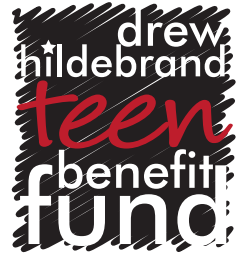
What is your career goal? \_\_\_\_\_

*Applicant agrees that his/her name shall be published on the DHTBF website and on future materials for the charity, and agrees to provide other information and documentation as may be reasonably requested by the DHTBF. Falsification of any information may result in disqualification. The application becomes the property of the DHTBF upon submission.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Deadline for applications is March 30th, 2010. Thank you!**



# Reference Form

Applicant Name \_\_\_\_\_

Reference Name \_\_\_\_\_

Reference Employer \_\_\_\_\_

Position \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

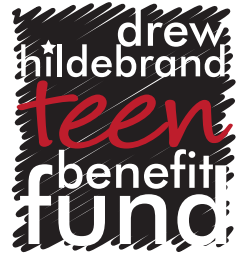
Relationship to Applicant \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

**Please explain in a one-page letter why you believe this Applicant should receive this scholarship. Please attach to this form.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# Reference Form

Applicant Name \_\_\_\_\_

Reference Name \_\_\_\_\_

Reference Employer \_\_\_\_\_

Position \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

**Please explain in a one-page letter why you believe this Applicant should receive this scholarship. Please attach to this form.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date