



WomanCare Courage Award Application Form 2023

1) Applicant Information

Name: _____

Address: _____ Postal Code: _____

Phone: _____ Email: _____

I am a Canadian Citizen I am a permanent resident (landed immigrant)

School that you will graduate from: _____

Please attach a copy of: Most recent report card

2) Child's Information

Proof of Parenthood is Required.

Please attach: Signed letter from school principal which confirms applicant's parenthood
OR signed letter from school counsellor which confirms applicant's parenthood

3) Post-Secondary Plans

Which post-secondary program(s) do you plan to apply for? _____

What are your long-term career plans? _____

4) Personal Plans

Please share some of your hopes and dreams for both you and your child. _____

5) Courage

Please share an example of how you have shown courage in your life. _____

6) References

Please list two teachers and/or community members who are willing to provide a written reference on your behalf.

#1 Name: _____ Job: _____

Phone: _____ Email: _____

#2 Name: _____ Job: _____

Phone: _____ Email: _____

Applicant Signature

Date

Remember to include:

- Proof of parenthood – a letter from school principal or school counsellor
- Copy of recent report card
- Two reference forms in signed sealed envelopes

WomanCare Courage Award 2023

CONFIDENTIAL REFERENCE FORM

Thank you for providing a reference for the student named below, who is applying for the WomanCare Courage Award. Please complete the form and return it to the student in a sealed envelope with your signature across the envelope flap. Enclosure of additional information on a separate sheet of paper is also encouraged.

Student Name: _____

How long and in what capacity have you known the applicant? _____

Please comment on the student's quality of attributes (including attitude, work ethic, motivation).

Please provide comments in support of this applicant.

Your name: _____

Position: _____

Signature

Date

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