

**By signing this application, I declare:**

1. That I have answered all the questions applicable to me and that all the information is true and complete. That I will notify People for Progress Foundation (PFPF) if I withdraw from full-time student status.
2. That People for Progress Foundation may request additional information pertaining specifically to my academic performance and enrollment status for the purpose of determining my eligibility for scholarship
3. That in applying for an award, pertinent information may be released to the donor of the award and provincial funding bodies
4. That if any information is inaccurate, I understand that any scholarship award may be reassessed and/or withdrawn
5. That if I receive an award, I will acknowledge the private donor(s) of the award and PFPF with a personal letter of thanks

<b>Name of Applicant:</b>	<b>CBE/CSSD ID Number:</b>
<b>Signature:</b>	<b>Date:</b>
<p>I acknowledge and agree that the disclosure of the information provided for this application, including my personal financial information, is required for the assessment of my child's/dependent's eligibility for this award, and hereby grant such consent as may be required by applicable privacy laws to the disclosure of my personal information for the purpose of assessing my child's/dependent's eligibility.</p>	
<b>Name of Parent/Guardian:</b>	
<b>Signature:</b>	<b>Date:</b>