OFFICE USE ONLY Date Received: APS Verified: Initials: Application #	
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# **TEAM OLIVITO BURSARY2024**

At Dr. Mark Olivito & Associates we value the importance of post-secondary education and contributing to the community. The team at Olivito Dentistry has established a bursary that will be awarded to a deserving applicant pursuing and/or continuing post-secondary education. This year we will select 2 deserving recipients and award a total amount of \$400 per recipient in scholarship funds.

### **ELIGIBILITY**

- Applicant must be a current patient of Dr. Mark Olivito & Associates
- Applicant must currently be enrolled in or planning to be enrolled in September2024 for post-secondary college or university as a student
- Applicant must complete "Application" portion of this form in full to be considered; incomplete applications will not be considered
- This bursary is <u>not</u> limited to graduating high school students. Mature students and students already attending a post-secondary institution are eligible.

#### **TIMELINE**

- All applications must be submitted no later than May 3, 2024
- Bursary recipient(s) will be notified no later than June 7, 2024
- A cheque, representing the amount of the bursary, shall be forwarded to the recipient once proof of enrolment is received from the registrar of the post-secondary institution

#### **SELECTION PROCESS**

- All complete applications will be reviewed
- Interviews may be requested with applicants

## APPLICATION

ULL NAME				
ADDRESS				
CITY	POSTAL CODE	PHONE ()		
EMAIL				
POST SECONDARY PROGRAM OF STUDY				
CURRENT SCHOOL				

Respond to the following 4 questions on a separate page.

Limit your responses to <u>ONE PAGE</u>, single spaced. Include your name on the response page.

- 1. What attracts you to your program of study?
- 2. Share your personal achievements/accomplishments from the past 2 years.
- 3. A) List any activities or events you have been involved with in the past 2 years outside of school and/or work requirements.
  - B) Select one of these events and describe what you enjoyed and gained from the experience.
- 4. How will this bursary contribute to the success of your education?

Application forms can be obtained from the KDHS Guidance Department or by emailing olivitodentistry@bellnet.ca.

All applications must be submitted by May 3, 2024 via email or in person.

Dr. Mark Olivito & Associates 87 Main Street East Kingsville, ON N9Y 1A3 olivitodentistry@bellnet.ca

