

**PGHA SCHOLARSHIP PROGRAM**

The PGHA will institute a scholarship program to recognize and reward commitment to hockey, community and education. The program provides financial assistance to members of the PGHA for their post-secondary education.

Every year the fund will reward outstanding young women who excel in the arena and the classroom and exhibit qualities of leadership and community. The recipients are determined based on their hockey and academic achievements as well as their community involvement. The winners of the scholarships will be chosen by a panel of selected volunteers in an unbiased position.

The Application and all required documentation must be submitted to the PGHA President at [president@pgha.net](mailto:president@pgha.net) no later than December 31st and the awards will be handed out shortly thereafter to be used for the next semester.

Good luck to everyone applying.

# Eligibility Criteria

Must be a current PGHA player or have played as an PGHA player for a minimum of three years.

Must be currently enrolled fulltime in either college or university

Information Required

1. Application Form
2. A letter outlining your contribution to hockey, involvement in the community, volunteer involvements and what hockey has meant to you.
3. Letter of program enrollment from your college or university on school letterhead.
4. Letter of reference from your coach, employer, or volunteer coordinator.



**Personal Information**

**PGHA SCHOLARSHIP**

APPLICATION FORM

|  |  |
| --- | --- |
| Name: | Birth Date: |
| Address: | City: |
| Postal Code: | Phone: |
| Email: |  |
| How did you hear about our program: |  |

**Hockey Background**

|  |  |
| --- | --- |
| Seasons registered with the Ice Kats: |  |
| Please list the teams and levels played over the last 3 years | 1 |
| 2 |
| 3 |

**Education Information**

|  |  |
| --- | --- |
| School: |  |
| Address: | Postal Code: |
| City: |  |
| Phone Number |  |
| Area of Study: |  |
| What you would like to do once school is completed: |  |

*I hereby apply for the PGHA scholarship and declare that all the information provided is complete and true and have answered all questions on this form. I have included all required documents and grant permission to proceed with my application.*

|  |  |
| --- | --- |
| Applicant Signature: | Date: |

# Application deadline December 31.

The information is this form will be used for the sole purpose of administering the Ice Kat Scholarship and the Applicant understands the winners’ names will be published on the Ice Kats web page.