

Earl Marriott Secondary School District #36 (Surrey) Phone: 604-531-8354

Email: canino s@surreyschools.ca

## Earl Marriott In-School Scholarship and Bursary Application 2025-2026

General Information:					
Last Name:		First Name:			
Student Number:		PEN Number:			
Date of Birth (yyyy/mm/dd):		Social Insurance Number:			
Mailing Address:		Phone Number:			
Email Address:		Elementary School Attended:			
French Immersion? Circle one Band? Circ		One Theater? Circle One		ne	
Yes or No	Yes o	r No	Yes or	No	
Post-Secondary Information:					
Post Secondary Plans:					
Program of Study:					
Academic Awards – High School e	x. Honour Roll, Aca	demic Comp	etitions, Medals and	Academic	
Excellence etc.					
Award	Ι	Description		Year(s) Recognized	

Organization/Activity		Role	Dates	Total Hours	Sponsor/Supervisor	
thletic Involven	nent ex. Act	tivities, Sports,	Programs, Tear	ms, etc.  Coach/Location	In-School	Communit
es, please provid	e details or sta	ate any informatio	on to heln us hetter			
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