**DEADLINE: June 7th, 2025**

Mail to: DFFHA Scholarship Committee

Delta Falcons Field Hockey

Box 19064, RPO #16

Delta, BC

V4L 2P8

Criteria for applicant:

1. G**raduating Grade 12 student who is under 19 years of age as of January 1st** (high school graduating year).

2. **Played for Delta Falcons Field Hockey for three or more years and has played for the club within the last 12 months.**

3. Has demonstrated a proficiency in the sport of field hockey.

4. Has made a contribution to the Delta Falcons Field Hockey Club through umpiring, coaching or otherwise volunteering.

5. Holds a minimum C+ average

6. Provides proof of acceptance by a post-secondary institution prior to acceptance of the Scholarship award.

Part One - Personal Information

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*First Last*

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Number Street City Postal Code*

**Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: / /** *Male Female*

Part Two - Playing Information

Years played for ***Delta Falcons Field Hockey***: *(minimum 3 years)*

Spring/Junior League: *(include* *years played)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Winter/Senior League: *(include* *years played)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other playing experiences:

FHBC High Performance (Regional/Provincial Teams): *(include* *years played)*

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National, or other Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coaching Experience

Years coaching for ***Delta Falcons Field Hockey:* \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age group & Year Reference/Coordinator’s Name Phone #

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List any coaching clinics that you have attended and any coaching levels completed:

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Umpiring Experience

Years Umpired for ***Delta Falcons Field Hockey***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age group (Junior/Senior) & Year Reference/Coordinator’s Name Phone #

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List any umpire clinics or training that you have attended and the umpiring levels you have achieved:

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Additional Volunteer Experience

Please list any other volunteer experience with the Delta Falcons Field Hockey Association, starting with the most recent (use separate sheet if necessary). These are activities you have participated in other than as a player, coach or umpire:

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Part Three - School and Community Involvement

List any other involvement in school or community that you believe is important to this application:

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Part Four - Closing Information

I have enclosed:

1. Transcripts of Grade 11 and 12 marks (include second term marks for Grade 12).
2. Proof of acceptance from post-secondary institution (if available – this can be provided post-award but is required to receive an award).
3. One reference letter from coach, person in charge of team you coached/junior coached, umpire coordinator, or other.
4. Proof of participation in Coaching Clinic and/or Umpire Clinic (if available).

Selection:

Delta Falcons Field Hockey Association Scholarship Selection Committee may choose to withhold or cancel the scholarship for the following reasons: lack of suitable candidates; failure to meet terms and conditions of the award; withdrawal from post secondary institution.