



ONTARIO SHEET METAL CONTRACTORS ASSOCIATION

30 Wertheim Court, Unit 26, Richmond Hill, Ontario L4B 1B9
Telephone: 905-886-9627 Fax: 905-886-9959

March 7, 2014

Bulletin No. 05-14

TO: ALL MEMBERS

WALLY MCINTOSH MEMORIAL SCHOLARSHIP

Applications are now being accepted for the 2014 Wally McIntosh Memorial Scholarship. Two recipients will be named.

The \$2000.00 annual entrance award (per recipient) is available to the children of owners, partners and employees of an Ontario Association member contractor. Please inform all your employees of the details of this award. Application form is attached.

Note that the applicant must:

- 1) be a son or daughter of an employee of a voting member of the Ontario Sheet Metal Contractors Association.
- 2) be graduating from high school and entering a College or University of his/her choice.
- 3) achieve a minimum of 75% average on six Grade 12 subjects.
- 4) include a recommendation from school principal.
- 5) have demonstrated leadership qualities through involvement in extra-curricular or community activities, includes volunteer work.

Attached (separate attachment) please find the evaluation form so the applicant is aware of the scoring system, which is divided into 5 categories.

Preference will be given to candidates whose connection is with persons involved directly with the sheet metal industry.

Deadline for applications is April 30, 2014

**ONTARIO SHEET METAL CONTRACTORS ASSOCIATION
WALLY MCINTOSH MEMORIAL SCHOLARSHIP**

APPLICATION

Amount: \$2,000 Entrance Award

Conditions:

Applicants must:

- 1) be a son or daughter of an employee of a voting member of the Ontario Sheet Metal Contractors Association, graduating from high school and entering a College or University of his/her choice.
- 2) achieve a minimum of 75% average on six Grade 12 subjects.
- 3) include recommendation from school principal.
- 4) have demonstrated leadership qualities through involvement in extra-curricular or community activities, includes volunteer work. (see attachment) for scoring system.

Preference will be given to candidates whose connection is with persons involved directly with the sheet metal industry.

Instructions:

- Complete all sections of the application form:

Section A – to be completed by Applicant
Section B – to be completed by Employer

- **Mail or Email to:**

**Ontario Sheet Metal Contractors Association
30 Wertheim Court, Unit 26
Richmond Hill, ON L4B 1B9**

Email: malava@bellnet.ca

- Selections will be made after final transcripts are received.

Applications must be in the OSM Office by April 30, 2014

SECTION A (to be completed in full by applicant)

Name: _____

Date of Birth: _____

Address (in full -include postal code): _____

Email: _____

Tel: (include cell/home) _____

Name of College or University of your choice: _____

Program: _____

List name of two people we could contact for a character reference, including full mailing address, telephone number and occupation. **PLEASE INCLUDE EMAIL.**

- | | |
|-------------------------------------|-------------------------------------|
| 1. _____

_____ | 2. _____

_____ |
|-------------------------------------|-------------------------------------|

Enclose the following with your application:

- An account of your academic extra-curricular and community activities, including your leadership qualities shown through these activities, giving details as to the extent of your involvement. You may also incorporate an employment history, listing any past and present work experience as a volunteer or otherwise.
- An official transcript of most recent Grade 12 marks. You may include an interim transcript at the time of application; however, a final official transcript is required when available.
- A signed recommendation from your School Principal giving the school name and complete address.

SECTION B (to be completed by employer of parent of applicant)

Firm name: _____
Member of Ontario Sheet Metal Contractors Association

Address: _____

Telephone: _____ Email: _____

EMPLOYEE

EMPLOYER

Name of father/mother of applicant

Name of authorized representative

Signature

Signature

Date

Date