



Wally McIntosh Memorial Scholarship Scholarship Amount: \$2500 Entrance Award

CONDITIONS	 Applicants must: be a son or daughter of an employee of a voting member of the Ontario Sheet Metal Contractors Association (OSM), graduating from high school and entering a College or University of his/her choice. achieve a minimum of 75% average on six Grade 12 subjects. include recommendation from school principal. have demonstrated leadership qualities through involvement in extra-curricular or community activities, includes volunteer work. (see attachment) for scoring system.
APPLICANT INSTRUCTIONS	 Complete all sections of the application form: Section A – to be completed by Applicant Section B – to be completed by OSM Member Employer Include with your application: 1. 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. 2. 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. Selections will be made AFTER final transcripts are received. 3. A signed recommendation from your School Principal giving the school name and complete address.
EVALUATION CRITERIA (20% max per Criteria)	 Academic Achievement (Grade Average) Academic Extra Curricular Activities Community Activities (Includes Volunteer Work) Leadership Qualities

Employment History

Email application form and requisite attachments to: Diana Ramirez dramirez@osmca.org

Applications must be received by August 12, 2022

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





Wally McIntosh Memorial Scholarship Application

SECTION A – ALL fields to be completed by applicant.

Applicant										
	Surname			Given Name(s)						
	Street #	Street				Unit/Apt				
	Street # Street					ΟΠΙΙ/Αρι				
	City/ Town			Province		Postal Code				
	Home Phone #		Cell Phone #		email					
Name of University or College of Choice:										
Program:										
REFERENCES:	List the names of two people we can contact for a character reference. Include full mailing address, telephone number, email and occupation.									
Reference 1										
	Surname			First Nam						
	Street #	Street				Unit/Apt				
		Oncer								
	City/ Town			Province		Postal Code				
	Home Phone # Cell Phone #			email						
	Occupation:									
Reference 2		1								
	Surname			First Name						
	Street #	Street				Unit/Apt				
	City/ Town			Province	Postal Code					
	Home Phone #	Cell Phone #			email					
	Occupation:									





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SECTION B – ALL fields to be completed by OSM Employer of Parent.

Employer										
(OSM Member)	Company Name									
	Street # Street					Unit/Apt				
	City/ Town	City/ Town Province						Postal Code		
	#	Cell Phone	e #		email					
	Authorized F	Represe	entative							
		-								
					nature					
		F			First Name		Surname			
						Marath		Year		
				Day	y	Month		Year		
-	Employee									
(Pa	arent of Applicant	t)								
	Signature									
				First Name Surnam		Surname	Э			
			Day	V	Month		Year			
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				Oc	cupation:					