

Deadline for submissions is Wednesday, October 16, 2024

| Section 1: General Information | |
|---|----------------|
| Name: | Date of Birth: |
| Gender / Gender Identity: | Telephone: |
| Sport (Primary): | |
| Full Mailing Address: | |
| Parent/Guardian Name: | |
| Telephone: | |
| E-mail (may include athlete and/or parent/guardian email address. Please note all correspondence related to this application will be sent to this email address): | |

| Section 2: Summary of volunteer activities in 2023 (Include a reference letter from one of the organizations noted below regarding your volunteer role) | |
|---|-------------------------------|
| Organization | Description of Volunteer Role |
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Section 3: Educational Status (A transcript must be included with your application)

Name of School:

Current year of study (i.e. 1st year, 2nd year, etc.):

Year of Graduation from Post-Secondary Institution:

Section 4: Athletic Performance January – December 2023

| Name of Event | Type of Competition (Championship or Invitational) | Placing | Number of Teams and/or Competitors | Date |
|---------------|--|---------|--|------|
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Section 5: Checklist

Important: Please review your application and be sure that all required information has been provided.

- ☐ Reviewed the program guidelines.
- ☐ Completed all sections of the grant application.
- ☐ Included a letter of reference from an organization regarding your volunteer role.
- ☐ Included a transcript from your post-secondary institution.

Section 6: Privacy Notice

The personal information in this form is being collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015, for the purpose of program administration and assessing the merits of each funding application. Please note that the information you provide can be subject to an Access to Information request. If you have any questions about the collection, use and disclosure of your personal information, please contact the Access and Privacy Coordinator, Department of Tourism, Culture, Arts and Recreation at 709.729.5198.

Section 7: Athlete's Declaration

I hereby declare that all the above information, to the best of my knowledge, is true and complete. Award recipients will permit the Government of NL to publish their names, city or town of residence, and/or photographs for purposes related to the Michelle Healey Memorial Award.

Applicant's Signature:

Date:

(sending by email satisfies the signature requirement)