



The Jim Stirling Scholarship Program

B.F.L Canada is retained as Insurance Broker for Hockey Canada. They are committed towards risk management, loss control objectives and assisting in making the game of hockey a safe and enjoyable sport. As longtime insurance brokers of Hockey Canada, BFL Canada provides each provincial branch with a \$1,000 scholarship in honour of their dear colleague and friend Jim Stirling who passed away in 2011.

A recipient will only be awarded this scholarship once during his/her post-secondary schooling.

Two \$500 Scholarships or one \$1,000 will be awarded to registered Hockey Northwestern Ontario ("HNO") hockey participants (player, official, coach, etc.) <u>currently attending a university/college program, during 2024-2025</u>, and who has, in the opinion of the Association, displayed a high degree of tenacity and dedication to his or her team/position combined with scholastic excellence. <u>The applicant must be returning to College or University in the fall of 2025</u>. The recipient(s) will be selected by an HNO Committee and will be announced at the Annual General Meeting held in June.

Payment will be issued upon receipt of <u>proof of payment and attendance</u> at a recognized University or College of your choice after <u>August 31, 2025</u> and prior to <u>December 31, 2025</u>

Applications will be received until Friday, May 9, 2025. Please forward to:

Hockey Northwestern Ontario 1224 Amber Drive Thunder Bay, Ontario P7B 6M5

or info@hockeyhno.com

The Jim Stirling Scholarship



General Information – Please print clearly

1)	Name:			First		
		Last		First		
2)	Mailing Address:					
3)	Email Address:					
4)	Phone No:					
5)	Date of Birth (mm/dd/yyyy):					
6)	SCHOLASTIC RECORD FOR THE PAST TWO YEARS:					
٠,	Name of Institute	Grade/Year	Average	Dates Attended		
7)	COLLEGE/UNIVERSITY YOU ARE PRES	SENTLY ENROLLED:				
	COLLEGE, ONIVERSITY TOO ARE TRESERVET ENROCLED.					
8)	COLLEGE/UNIVERSITY ATTENDING IN	1 2025/2065				
9)	FIELD OF STUDY:					
10)	LIST OF HONOURS, AWARDS OR SCH	OLARSHIPS YOU HAV	RECEIVED:			
•	,					
11)	LIST A NAME WHICH MAY BE CONTAC	TED AS AN ACADEMI	REFERENCE. THE R	EFERENCE MUST BE FROM		
	ACADEMIC SOURCES FAMILIAR WITH	YOUR CURRENT LEVE	L OF STUDIES.			
	ACADEMIC REFERENCE NAME:					
	Contact Number:			_		

12) INCLUDE WITH THIS APPLICATION A COPY OF YOUR CURRENT ACADEMIC RECORDS.

SUPPLEMENTARY INFORMATION

INVOLVEMENT. IF THE APPLICANT IS AN OFFICIAL, PLEASE DESCRIBE YOUR OFFICIATING INVOLVEMENT WITH HNO:					
LIST OTHER SPORTS YOU PLAYED IN ORGANIZED GROUPS IN THE LAST FIVE YEARS, POSITION PLAYED AND NATURE OF GROUP:					
LIST ANY EXTRA-CURRICULAR ACTIVITIES AND/OR VOLUNTEER WORK THAT YOU HAVE PARTICIPATED IN DURING THE LAST FIVE YEARS:					
	_				
Signature of Applicant: Date:					
Signature of Parent/Guardian: Date: Date:					