

GHS SCHOLARSHIP APPLICATION

LAST NAME (AS IT APPEARS ON PASSPORT)		FIRST NAME (AS IT APPEARS ON PASSPORT)	
PROGRAM OF INTEREST			
March Break	International Summers	Summer Community Service	Blyth Academy Florence
TERM(S) OF STUDY (Global High School & Blyth Academy Florence Only)		COURSE OF INTEREST (International Summers Only)	
Term 1	Term 2	Term 3	Term 4
HOME SCHOOL		CURRENT GRADE	
STUDENT EMAIL		PARENT EMAIL	
HOME ADDRESS			
CITY		PROVINCE/STATE	POSTAL/ZIP CODE
HOME PHONE NUMBER		ALTERNATE PHONE NUMBER	

HAVE YOU SUBMITTED YOUR PROGRAM APPLICATION FORM & DEPOSIT:

INCLUDED IN THIS PACKAGE

MAILED AT AN EARLIER DATE

APPLIED ONLINE

**Please note that Financial Aid applications cannot be assessed until the program application form, deposit, and registration fee have been submitted.*

HAVE YOU PREVIOUSLY APPLIED FOR FINANCIAL AID WITH BLYTH ACADEMY INTERNATIONAL?

YES

NO

WHY HAVE YOU CHOSEN TO PARTICIPATE IN THIS BLYTH ACADEMY PROGRAM?

WHY DID YOU SELECT YOUR COURSE AND LOCATION?

HOW WILL YOU MAKE A POSITIVE CONTRIBUTION TO THE PROGRAM?

WHY DO YOU THINK YOU SHOULD BE AWARDED FINANCIAL AID FOR THIS PROGRAM? *(IF APPLICABLE)*

HAVE YOU OR ANY FAMILY MEMBERS PARTICIPATED IN A BLYTH ACADEMY INTERNATIONAL PROGRAM?

HOW DO YOU PLAN ON CONTRIBUTING FINANCIALLY TO THE COST OF THE PROGRAM? *(IF APPLICABLE)*

DESCRIBE YOUR WORK, VOLUNTEER, AND EXTRA-CURRICULAR EXPERIENCE TO DATE

HOW DID YOU HEAR ABOUT BLYTH ACADEMY?

HOW HAVE YOU DEMONSTRATED LEADERSHIP IN YOUR WORK, VOLUNTEERING, EXTRA-CURRICULARS AND/OR PERSONAL AREAS OF INTEREST?

STUDENT SIGNATURE:	DATE:

PARENT / GUARDIAN SIGNATURE:	DATE:

WHERE HAVE YOU TRAVELLED AND WITH WHOM, AND WHERE WOULD YOU LIKE TO TRAVEL IN THE FUTURE?