

CHEEKBONE BEAUTY SCHOLARSHIP FUND

APPLICATION FORM

Full Name: _____

Date of Birth: _____

Address: _____ Province: _____ Postal Code: _____

SIN: _____ Phone Number: _____

Email: _____

Do you identify as Indigenous?

Yes No

Community/Nation you are part of: _____

Current Educational Institution and Location:

Current Program Name:

Current Program Year:

Please attach 'Proof of Enrolment' letter with application.

Yes No

Please attach 2-3 reference letters from friends, colleagues, or educators.

*Note: at least one reference must be from an educator.

Yes No

Please answer: Why are you the most deserving of the Cheekbone Beauty Scholarship Fund?

*Please limit your response to one page single-spaced or two pages double-spaced and submit with the completed form.



SUBMISSION INSTRUCTIONS

1. Complete application form.
2. Attach completed application form, proof of enrolment, reference letters and response to why you are the most deserving recipient in an email.
3. Email your complete submission to info@cheekbonebeauty.com with the subject line: [YOUR NAME]: 2023 Scholarship Application.

Deadline: November 30th, 2023 – 11:59PM EST.