

Sales Certification Scholarship Fund

MMDA
MANITOBA MOTOR
DEALERS ASSOCIATION



Application Form

Sales Certification Scholarship Fund

Application Form

ELIGIBILITY: To be eligible you must:

- Be a member in good standing (or spouse, child or grandchild – as recognized by law) of the MMDA Sales Certification Program.
- Provide proof of registration or graduation as a full-time student from a recognized University, Community College, Technical Institute or other post-secondary institution for advanced learning.
- Demonstrate high ideas, leadership skills and qualities of citizenship.
- Be prepared to attend any awards function as a successful candidate.
- Submit this application for consideration on a timely basis.

Note: Mature students are encouraged to apply. Dealer principals & family are not eligible for awards

APPLICATION PROCEDURE:

The original application must be submitted to:

Manitoba Motor Dealers Association
112-1790 Wellington Ave
Winnipeg, MB R3H 1B2
Email: info@mmda.mb.ca

- If possible, attach a copy of your most recent full year school transcript. To be considered valid, this must be submitted on school letterhead and authorized by a school official.
- Your application must be co-signed by both the Sales Certification Program member and the Dealer Principal of the member's employing dealership. A copy of the member's current province of Manitoba Salesperson's Permit is required.

The applicant is responsible to complete the application in full. If the application is forwarded to the MMDA office without the applicable information, signatures and Salesperson Permit copy, the applicant will not be eligible for consideration. Please submit the application as requested – do not submit original documents such as newspaper clipping, letters of reference and certificates, as attachments (copies are welcome).

The fund's administrators reserve the right to authenticate all information pertaining to the application. All information on the application will be held in the strictest of confidence.

All sponsoring Sales Certification Program members and successful applicants will be notified as to the decisions of the MMDA Sales Certification Committee. These decisions will be final.

SALES CERTIFICATION MEMBER & DEALER PRINCIPAL ENDORSEMENT

This application, in the name of _____ is being submitted for
(Scholarship Applicant)

consideration by the Gerald Rewucki Memorial Fund committee and is endorsed by: (please print)

_____ ; (members signature) _____

A member in good standing of the Sales Certification Program and _____ (dealer principal) of _____ (dealership).

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PERSONAL INFORMATION

Last name	First name and middle initial	Male	Female
Permanent Address (number and street)		Apartment number	
City, town, or post office	Province	Postal code	Area code & phone number
Date of birth (M/D/Y) / /			

PROPOSED PROGRAM OF STUDY			
Name of institute	Program	Expected start date	Expected date of completion
Address of institute			
Which year of your proposed program of study will you be entering?			
EDUCATIONAL HISTORY			
Name of most recent high school or post-secondary institution	Program	Date from	to
Certificate, diploma, degree completed			
ESTIMATED EXPENSES FOR ACADEMIC/VOCATIONAL YEAR			
Tuition and incidental fees per year:	Books per year:	Tools/Equipment:	
Residence/room & board per year:	Transportation per year:	TOTAL:	

PERSONAL BACKGROUND – please be specific

(List those school and/or community activities you are involved in, which may be of assistance to the committee in awarding this bursary, include teams, clubs. Positions of responsibility, volunteer work, etc.)

EXTRA – CURRICULAR ACTIVITIES

YEAR	ACTIVITY

COMMUNITY SERVICE AND VOLUNTEER ACTIVITIES

YEAR	ACTIVITY

WORK EXPERIENCE

YEAR	ACTIVITY

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PERSONAL BACKGROUND (Continued)

Outline briefly your plans for your future career or profession and how this award would assist in achieving your goals:

Comment on non-financial obstacles, if any, you have had to overcome or face in your pursuit of academic, extra-curricular or community service goals:

Comment on your knowledge and/or experience with the Automotive Industry:

Additional information related to this application which you feel is important for consideration by the trustees:

AGREEMENT:

I hereby certify the above information is correct and can be verified on request.

Signature of Applicant: _____ Date: _____.

(or parent/guardian if applicant is under 18 years of age)

NOTE: All information contained in this application shall remain confidential.

Application Deadline: October 4, 2019