

# NOMINATION FORM

C.D. HOWE SCHOLARSHIP ENDOWMENT FUND NATIONAL ENGINEERING SCHOLARSHIP PROGRAM

**This form is to be completed by the Nominating Official. Each institution may nominate TWO candidates**

**The applicant must upload this form to their online application before June 1, 2020.**

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| <b>I wish to nominate</b> _____<br>(Name of applicant – please print)  |  |
| <b>A first-year student at</b> _____<br>(Name of university or college – please print)   |  |
| <b>Declaration of Eligibility</b>  |  |
| For the C/D/ Howe Scholarship Endowment Fund: National Engineering Scholarship, I certify that the candidate meets the eligibility requirements <b>as outlined in the scholarship program guidelines.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| The following persons are acceptable as nominating officials: Dean of Faculty of Engineering and Head of Department of Engineering.  |  |
| <b>Nominating Official</b>   |  |
| <b>Name</b> _____<br>Last First Middle   | <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.        |
| <b>Title</b> _____   |  |
| <b>Permanent Address</b> _____<br>Street City Province Postal Code   |  |
| <b>Telephone</b> _____   | <b>Email</b> _____   |
| Date: _____  | Signature of nominating official: _____                          |
| <b>Please provide the following information of the person at the university or college who will act as a second contact for correspondence concerning this application.</b>  |  |
| <b>Name</b> _____<br>Last First Middle   | <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.        |
| <b>Title</b> _____   |  |
| <b>Permanent Address</b> _____<br>Street City Province Postal Code   |  |
| <b>Telephone</b> _____   | <b>Email</b> _____   |
| <b>Please note that the application must be dully endorsed by the nominating official above and the Director of the Awards/Financial Aid Office, below.</b>  |  |
| <b>Name</b> _____<br>Last First Middle   | <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.        |
| <b>Title</b> _____   |  |
| <b>Permanent Address</b> _____<br>Street City Province Postal Code   |  |
| <b>Telephone</b> _____   | <b>Email</b> _____   |
| Date: _____  | Signature of Director of the Awards/Financial Aid Officer: _____ |