



UPlan Award Application Form

Applicant: _____

Surname

Given name (s)

School: _____

Home Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Cell: _____

Date of Birth: _____ Email Address: _____

Parent/Guardian name and contact: _____

FUTURE PLANS:	Post-Secondary Institution	Area of Study
1st Choice		
2nd Choice		

VOLUNTEER INVOLVEMENT:	Role or Activity	Length of Service

How have you made the community of Maple Ridge, Pitt Meadows & Katzie First Nation, a better place?

Please submit this application form to UPlan Award Committee: uplanrm@gmail.com