



## **B.F. Lorenzetti & Associates Inc. Jim Stirling Scholarship Bursary**

February 2, 2022

B.F Lorenzetti & Associates are retained as Insurance Brokers for Hockey Canada. They are committed towards risk management, loss control objectives and assisting in making the game of hockey a safe and enjoyable sport. As long time insurance brokers of Hockey Canada, B.F. Lorenzetti provides each Hockey Canada Branch a \$1000 for the Jim Stirling Scholarship. In the specific case of Hockey North, we have two Territories, we receive \$1,000 for each of the NWT and Nunavut to provide to deserving hockey participants for continued education.

The Jim Stirling Scholarship will be awarded to a former member of Hockey North (player, official, coach) who is currently enrolled in a college/university program and has displayed a high degree dedication to his or her scholastic excellence. The recipient will be selected by a Committee comprised of the Executive Director of Hockey North and a delegate from the representing zone. The scholarship will be awarded at a Hockey North meeting following the application deadline.

The Application deadline is at 5:00pm on Friday, March 25, 2022.

If you require further information, please contact the Hockey North at (867) 446-8890 or email [kylek@hockeynorth.ca](mailto:kylek@hockeynorth.ca)

Sincerely,

Kyle Kugler  
Executive Director  
Hockey North



# B.F. Lorenzetti & Associates Inc. Jim Stirling Scholarship Bursary APPLICATION FORM

## SECTION I.

APPLICANT INFORMATION										
LAST NAME					FIRST NAME			MIDDLE INITIAL(S)		
DATE OF BIRTH	MM		DD		YY		EMAIL ADDRESS			
ADDRESS										
CITY / TOWN					POSTAL CODE					
PHONE NUMBER					ALTERNATE NUMBER					
PARENT / GUARDIAN INFORMATION										
LAST NAME					FIRST NAME			MIDDLE INITIAL(S)		
PHONE NUMBER					EMAIL ADDRESS					
MAILING ADDRESS (IF NOT THE SAME)										

## SECTION II.

EDUCATIONAL BACKGROUND				
<b>A. EDUCATION</b>				
YEAR	GRADE/YEAR	SCHOOL/COLLEGE/UNIVERSITY	TOWN/CITY	DIPLOMA
<b>B. EDUCATIONAL PLANS FOR NEXT ACADEMIC YEAR</b>		UNIVERSITY <input type="checkbox"/>	COMMUNITY COLLEGE <input type="checkbox"/>	OTHER <input type="checkbox"/>
<b>C. POST-SECONDARY INSTITUTION(S) YOU PLAN TO ATTEND (RANK IN ORDER OF CHOICE).</b>				
1. SCHOOL NAME		TOWN / PROVINCE		MAJOR
2. SCHOOL NAME		TOWN / PROVINCE		MAJOR
3. SCHOOL NAME		TOWN / PROVINCE		MAJOR

**SECTION III.**

<b>PLAYING/OFFICIATING/COACHING BACKGROUND</b>				
<b>A. HOCKEY EXPERIENCE</b>				
<b>YEAR</b>	<b>PLAYER / OFFICIAL / COACH</b>	<b>LEVEL/CERTIFICATION</b>	<b>POSITION</b>	<b>ASSOCIATION</b>
<b>B. TEAM / INDIVIDUAL RECOGNITION OR AWARDS (ATTACH LIST OF NECESSARY):</b>				
<b>C. NCCP / OFFICIATING / TRAINING CERTIFICATIONS:</b>				

**SECTION IV.**

<b>SCHOOL ACTIVITIES</b>	
<b>A. LIST VARIETY OF ACTIVITIES, INCLUDING OFFICES AND/OR POSITIONS HELD (ATTACH LIST IF NECESSARY)</b>	
<b>B. AWARDS / RECOGNITION (ATTACH LIST IF NECESSARY)</b>	
<b>ACADEMIC</b>	
<b>ATHLETIC</b>	
<b>OTHER</b>	
<b>C. COMMUNITY SERVICE: DEMONSTRATED SERVICE THROUGH ACTIVE PARTICIPATION.</b>	

**SECTION V.**

WORK EXPERIENCE					
1. EMPLOYER		TOWN / PROVINCE		POSITION	
2. EMPLOYER		TOWN / PROVINCE		POSITION	
3. EMPLOYER		TOWN / PROVINCE		POSITION	

**SECTION VI.**

How will your post secondary education benefit from your hockey experiences?

(ATTACH SEPARATE SHEET OF PAPER IF NECESSARY)

**SECTION VII.**

ANYTHING ELSE THAT YOU WOULD LIKE TO MENTION THAT HAS NOT BEEN COVERED IN THIS APPLICATION

(ATTACH SEPARATE SHEET OF PAPER IF NECESSARY)

**PLEASE INCLUDE WITH THIS APPLICATION**

- **TWO REFERENCE LETTERS; 1 HOCKEY AND 1 ACADEMIC**

**REFERENCES:** LIST THREE (2) REFERENCES (NON-RELATIVES):

<b>LAST NAME</b>		<b>FIRST NAME</b>	
<b>PHONE NUMBER</b>		<b>EMAIL ADDRESS</b>	

<b>LAST NAME</b>		<b>FIRST NAME</b>	
<b>PHONE NUMBER</b>		<b>EMAIL ADDRESS</b>	

**CERTIFICATION:**

I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT AND CAN BE VERIFIED UPON REQUEST.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

APPLICATIONS MUST BE RECEIVED NO LATER THAN DEADLINE SPECIFIED ON THE HOCKEY NORTH WEBSITE AND FORWARDED TO: [KYLEK@HOCKEYNORTH.CA](mailto:KYLEK@HOCKEYNORTH.CA)