



PATHFINDER SCHOLARSHIP APPLICANT INFORMATION

Applicant's Name _____
Surname Given name(s)

Date of Birth: ___/___/___ Gender: _____ School: _____
dd mm yy

CAMP SESSION OF CHOICE

- A Session (4 Weeks): June 26 to July 24 B Session (4 weeks): July 27 to August 24

BACKGROUND INFORMATION

Please list any character awards, distinctions and club, team and volunteer activities:

APPLICATIONS ARE DUE MARCH 1st, 2020

544 Eglinton Avenue East, Suite #201. Toronto, Ontario. M4P 1N9. 416.322.9735. camp@kandalore.com

Please list any certifications/qualifications you feel will be an asset to the Pathfinder Program:

Please provide a list of three references and their contact information:

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