



## John F. Hamilton Scholarship

Established 1999

The John F. Hamilton Scholarship Fund was established by Insurance Brokers Association of B.C. members and friends through voluntary contributions to fund an annual scholarship of \$3,500 to an insurance-industry student pursuing a post-secondary education. Income from fund investments plus a portion of the proceeds of the IBABC's annual golf tournament maintains the fund and finances future scholarships. The scholarship celebrates the contributions of Jack Hamilton (1931–1998), who earned his Commerce degree from the University of B.C. in 1955 and contributed to the insurance profession immensely over a long and distinguished career, retiring in 1997. He was honoured as Insurance Person of the Year in 1994.

**DONORS**  
**PREFERENCE**  
**STATEMENT**

The friends and associates of John F. Hamilton

Applicants will be considered for this scholarship on the basis of these priorities, listed in order of preference:

1. Applicants employed in the insurance industry in B.C. or who are children or relatives of insurance industry practitioners (with added preference given to applicants with a connection to members of the Insurance Brokers Association of B.C.);
2. Applicants must be enrolled in or display proof of acceptance in a post-secondary institution;
3. Applicants who are active in extra-curricular activities;
4. Applicants with high academic qualifications;
5. Applicants who show a commitment to community service; and
6. Applicants who can demonstrate financial need.

**VALUE**  
**APPLY TO**

\$3,500.00

Insurance Brokers Association of B.C.  
#1300, 1095 West Pender Street  
Vancouver, B.C. V6E 2M6

**DEADLINE**

This application must be completed and placed in the hands of Insurance Brokers Association of B.C. not later than September 1.

# The John F. Hamilton Scholarship

Established 1999

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## APPLICATION

### General Information

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NAME:

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STREET ADDRESS:

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CITY: PROVINCE: POSTAL CODE:

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TELEPHONE: FAX:

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### Qualifying Information

Qualifying employee/member of insurance industry

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NAME:

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RELATIONSHIP TO APPLICANT:

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STREET ADDRESS:

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CITY: PROVINCE: POSTAL CODE:

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OCCUPATION: EMPLOYER:

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TELEPHONE: FAX:

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### Academic Information

Schools attended for the past three years

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NAME:

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STREET ADDRESS:

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CITY: PROVINCE: POSTAL CODE:

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FROM: TO:

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Academic information, continued

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NAME:

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STREET ADDRESS:

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CITY: PROVINCE: POSTAL CODE:

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FROM: TO:

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NAME:

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STREET ADDRESS:

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CITY: PROVINCE: POSTAL CODE:

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FROM: TO:

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Academic honours, awards or scholarships you have received:  
(please include the monetary value, if any)

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1:

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2:

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3:

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4:

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5:

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6:

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**Financial Information**

Estimated cost of annual tuition: (include the cost of living expenses if attending a post-secondary institution away from home) \_\_\_\_\_

Employment record for the past two years, including summer and part-time work:

EMPLOYER	ADDRESS	YEAR	OCCUPATION

Give details of any financial assistance for the coming year for which you intend to apply (eg., loans, scholarships, etc.)

TYPE	SOURCE	AMOUNT

**Supplementary Information**

Preference will be shown to applicants who have demonstrated a commitment to community, personal achievement, ethics, and/or professionalism.

PLEASE DESCRIBE YOUR REASONS FOR YOUR COURSE OF STUDY AND YOUR CAREER GOALS BEYOND UNIVERSITY:

LIST SPORTS, HOBBIES OR RECREATIONAL ACTIVITIES IN WHICH YOU PARTICIPATE:

LIST COMMUNITY ACTIVITIES, VOLUNTEER WORK, CLUBS, OR GROUPS IN WHICH YOU PARTICIPATE:

LIST NON-SCHOLASTIC AWARDS AND ACCOMPLISHMENTS FOR WHICH YOU ARE PARTICULARLY PROUD:

LIST ANY OTHER EXTRA-CURRICULAR SCHOLASTIC ACTIVITIES:

**Declaration of Applicant**

"I, \_\_\_\_\_, do solemnly declare:

- a) that to the best of my knowledge and belief, the required information supplied herein is correct and complete in every respect, and
- b) that, any monies issued on the basis of this application will be used only for valid educational expenses associated with my university study."

SIGNED \_\_\_\_\_

AN EXTRA PAGE MAY BE USED TO PROVIDE ADDITIONAL INFORMATION



Your Best Insurance  
is an Insurance Broker.