



Quinn Fowlie Scholarship Nominee Declaration Form

I, _____, certify that I understand the criteria and am able to and wish to stand for nomination for the Quinn Fowlie Scholarship

**Nominees under the age of 18, please have your parent or guardian fill in the following:*

I _____, certify that I understand the criteria and agree that _____ can stand for nomination for the Quinn Fowlie Scholarship.

Nominee Signature: _____

Parent/Guardian Signature *(for nominees under the age of 18):*
