



LOVE-ALL



To ensure a smooth and efficient process, please note that the online application on our website at <https://www.love-all.ca/apply> will be automatically sent to our email address for processing. Therefore, there is no need to submit a separate copy of the form via email.

However, if you have completed a paper version of the application form or have a PDF copy, please scan and send it to us at info@love-all.ca. This will help us keep all your information together and streamline the review process.

Application Guidelines:

- a) Applications must meet the primary goal of the Fund.
- b) Applicants must be residents of Lambton County.
- c) For organizations, applications for funds that will substitute expenditures that are a normal part of the organizations operating and capital expenses will not be considered.
- d) Multiple Scholarship applications for the same applicant will not be considered in the same year.

Fund Expectations:

- a) Undertake and complete the commitments that have been identified in the application.
- b) Demonstrate how the funds could help/improve the applicant's goals as described in the application.
- c) Spend the funds as per the application in the time frame identified in the application.
- d) Inform SCF should the funds not be used (in part or whole) or there are deviations from the intentions detailed in the application.

Application:

The Scholarship Application Form collects basic information only. Therefore, the applicant should support their application with the information that details the applicant's reasons why they should receive funding and how they will meet or exceed the Fund's expectations.

Types of Scholarships:

- a) **Start Tennis Scholarship:** To assist and enhance opportunities to learn and play tennis for those who are restricted by specific circumstances.
- b) **Play Tennis Scholarship:** To assist and enhance training and competitive opportunities.
- c) **Guide Tennis Scholarship:** To assist with tennis programs that have a primary focus on introducing and promoting tennis.
- d) **Instruct Tennis Scholarship:** To assist tennis instructors in obtaining qualifications that are recognized by the tennis community.



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Application Form

Name: _____

Email: _____

Phone: _____

Address: _____

Parental consent: Name, email and phone number of parent/guardian. If the applicant is under 18 years of age at the time of application, a parent/guardian must consent to the submission of the application

This application is for a ...

- Start Tennis Scholarship
- Play Tennis Scholarship Guide
- Tennis Scholarship
- Instruct Tennis Scholarship Amount of

Funding Request: Please include other sources of funding that are being used to support the project if applicable:

Description of Activities: Please include location and manner of activities being carried out.

Purpose of Activities: Tell us how your project aligns with our values



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Target Population: Describe who will benefit from the activities (please include age range).

Performance Measures: Briefly describe how you will measure the project's outcome and how it will benefit the tennis community in Sarnia-Lambton.

References: Please include two references other than a family member or relative who can provide information about the applicant's involvement in tennis. The applicant must inform the references about this application and confirm that the Sarnia Community Foundation will contact them accordingly.

- By checking, I consent to submitting a photo of myself with a tennis racket upon being a successful recipient.
- By checking, I agree to the statement - Permission to publish. The applicant gives SCF and LOVE-ALL permission to publish their name and photograph in relation to the scholarship if they are the recipient. All other information will remain confidential. If the applicant is under 18, a parent or guardian must consent on behalf of the applicant.
- By checking, I confirm that I have read all the information in the tabs above (Guidelines, scholarship, expectations, application)
- By checking, I understand that any applications received after the deadline will be considered for next year's scholarship.



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- By checking, I agree to make a brief statement on how the money was used if I am a successful applicant.
- By checking, I have evidence of residency in Lambton County
- By checking, I declare that the information in this application is true and accurate.

Date: _____

Signature: _____