

### Purposes and Amount of the Scholarship

The principal purpose is to support post-secondary education, for the children of policyholders, of Caradoc Townsend Mutual Insurance Company (CTM).

Applications may be received from the sons and daughters of CTM policyholders, whom are under the age of 25 years, as of December 31, 2018, as well as from policyholders themselves who are under 25 years of age and are enrolled in post-secondary education, either academic or technical, to improve their life skills, to become productive citizens within their respective communities.

The scholarship amount has been set at \$1,000.00 each, and a total of 10 will be awarded for 2018.

This scholarship is **not** available to the children of any of CTM staff or directors.

### Scholarship Topic and Conditions

The application must be fully completed and received by CTM in Waterford or Mount Brydges, by **4:30 P.M. on September 28, 2018** along with an essay on the following topic.

For the 2018 CTM Scholarship, applicants are invited to write an essay about the following:

***With society's ever-increasing acceptance of personal information sharing, privacy is becoming a thing of the past. What are some of the unintended consequences and risks associated with third parties having access to your personal data?***

The essay must be a minimum of 700 words, and a maximum of 800 words in length.

**Font:** Your essay should be word processed in 12-point Arial font.

**Double space:** Your entire essay should be double spaced, with no single spacing anywhere and no extra spacing anywhere. There should not be extra spaces between paragraphs.

**Margins:** Your essay should have a 2.54cm margin on top, bottom, left, and right.

**Indentation:** The first line of each paragraph should be indented.

**Align Left:** The text of your essay should be lined up evenly at the left margin but not at the right margin. In your word processor, choose "Align Left." Do not choose "Justify."

Successful applicants will be notified by October 31, 2018.

A copy of your SIN card and proof of enrollment in a full time post-secondary educational program (including apprenticeships and co-op programs) must be provided from the **Registrar's Office** prior to scholarship funds being released. The school term can be any term that starts in the twelve month period, beginning September 1<sup>st</sup>, in the year of the application.

### Submission Information

**Deliver or mail to:**

Caradoc Townsend Mutual Insurance  
780 Old Highway 24, P.O. Box 1030  
Waterford, ON N0E 1Y0  
**Attention:** Mary Heastont, VP Corporate Services

Or

Caradoc Townsend Mutual Insurance  
22508 Adelaide Road  
Mount Brydges, ON N0L 1W0  
**Attention:** Mary Heastont, VP Corporate Services

**Email to:** mheastont@ctmins.ca

First Name:  Last Name:

Address:

City/Province:  Postal Code:

Email:

Phone:  Date of Birth:

Academic Accomplishments / Other Interests (hobbies, recreational, etc.):

Name of Post-Secondary Institution Applied To / Enrolled In & Program Name:

I am a Policyholder:

My parent is a Policyholder:

CTM Policyholder Name:

### Declaration and Privacy Clause

I authorize Caradoc Townsend Mutual to collect, use, and disclose any of this personal information, subject to the law and Caradoc Townsend Mutual's policy regarding personal information, for the purposes of communication with me, assessing my application, detecting and preventing fraud, and awarding the scholarship should my application be chosen.

"I hereby consent and give permission to Caradoc Townsend Mutual to publish or present to the general public my name and the essay I submit with this scholarship application. No other personal information about me can be published such as my contact information or school. I understand by submission, if published by Caradoc Townsend Mutual, will appear with an appropriate copyright notice."

I certify the information in this application is complete and correct. I authorize the selection committee to confirm any and all information contained herein.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of CTM Policyholder

\_\_\_\_\_  
Date

**We must receive your submission in one of our offices by 4:30 P.M. on September 28, 2018**