The Anton and Demetra Karigiannis Award Application

Name:	
	(PLEASE PRINT NAME & ADDRESS)
Address:	
Postal Code:	Phone Number:
E-mail Address:	
What is the name of th university that you atte	ne degree granting university, community college, or polytechnic end or plan to attend?
What full time degree,	diploma or certificate program will you be enrolled in?
What are your long-ter	m career goals?
Please provide the deta	ails of Arahovitan ancestry.
We receive many appli	cations but unfortunately we can only select a limited number of

We receive many applications but unfortunately we can only select a limited number of candidates. To help us with the selection process, please write a one-page essay about yourself, your achievements, and any other information that would help us determine why we should select you for an award over the other applicants.

Closing date for applications is **August 15th of each year.** Applications submitted after that date will be declined and/or held over for a future year. While all applications are appreciated, **only those applicants selected for further consideration will be contacted.**

Please mail applications to: Anton and Demetra Karigiannis Trust

P.O. Box 10004 Yonge and Finch PO

North York, ON, M2N 0B6