

Awards, Commendations or Positions of Leadership (Elected Positions, medals, awards, etc)

Grade	Name of Organization/Employer	Title and Description of Role
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.

Special Circumstances

If you have circumstances that you feel should be considered when assessing this application, state them here. (150 word max)

When I was fifteen, my parents separated, and I became part of a single parent family. In addition to the emotional weight of this change, I have struggled to contribute to our household income through part time work after school. Without the support of any extended family, it has largely fallen on me as the oldest sibling to provide care for my younger siblings while my mother is at work and to contribute financially when possible. This has severely restricted the time I have available for volunteering in the community. In fact, I had to make the difficult decision to give playing soccer after 10 years due to the expense and time commitment. I would ask that would please consider these circumstances when reviewing my application.

Awards, Commendations or Positions of Leadership (Elected Positions, medals, awards, etc)

Grade	Name of Organization/Employer	Title and Description of Role
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.
<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Click or tap here to enter text.	Click or tap here to enter text.

Special Circumstances

If you have circumstances that you feel should be considered when assessing this application, state them here. (150 word max)

This past year I have been diagnosed with atrial fibrillation, a heart problem which involves a rapid heartbeat leading to heart failure. I have been hospitalized several times and have had to give up my everyday activities including athletics, volunteering and attending class. I have missed over 50 classes and have not been able to maintain my grades at the level have achieved in the past. I would ask that you please consider the impact of this diagnosis when you are reviewing my application. Thank you.