



ACTION BULLETIN

TO: HNL Member Associations, Leagues & Teams
HNL Board of Directors, HNL Referee's Division

FROM: Craig Tulk, Executive Director HNL

DATE: April 19, 2021

RE: **Applications for \$1,000.00 Jim Stirling Scholarship DEADLINE EXTENDED**

Hockey NL is presently accepting applications for the Jim Stirling Scholarship that is being awarded by B.F. Lorenzetti and Associates, the insurance carrier for Hockey Canada Insurance.

Applications will be accepted until May 3, 2021.

Applicants must have been enrolled in a University or other post-secondary education facility in 2020-2021. They must be pursuing a field that encourages and promotes "risk management" such as physical education, physiotherapy, massage therapy, sports medicine, etc.

Applicants must provide proof of enrollment with their application.

Please notify players and coaches who were with your team during the 2020-2021 season of this bursary and pass along an application to them.

Yours in Hockey,

A handwritten signature in black ink, appearing to read "Craig Tulk", is written over a light grey rectangular background.

Craig Tulk
Executive Director,
Hockey NL

CT/th

HOCKEY NL

32 Queensway, P.O. Box 176, Grand Falls-Windsor, NL A2A 2J4 Tel: (709) 489-5512, Fax: (709) 489-2273
E-Mail: office@hockeynl.ca Internet: www.hockeynl.ca



**APPLICATION FOR 2020-2021 JIM STIRLING SCHOLARSHIP
SPONSORED BY B.F. LORENZETTI & ASSOCIATES**

Name: _____

Address: _____ Town: _____

Postal Code: _____ Telephone # (Residence): _____

Team / Association registered with in 2020-2021: _____

Name	Capacity	Division
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I have been enrolled in post secondary education for _____ years. During the
2020-2021 school season I was enrolled at _____
Name of School

which is located in the city / town of _____.

Please provide a letter from the school (or University) to verify same. Enclosed is also a copy of my subjects and marks for the 2020-2021 season, verified by the school.

QUESTION:

As a member of Hockey NL, do you feel you have a role to play in Risk Management? Explain.

Your field of studies: _____

Signature of Applicant Date

Please return this application, along with any other necessary documents by May 3, 2021 to:

Hockey NL
P.O. Box 176
Grand Falls-Windsor, NL A2A 2J4 Fax#: 709-489-2273