

**CSF of BGM Application  
Student Information for Awards Night**

**Please PRINT legibly**

**1. Name:**

**Your everyday name:**

**Formal name:**

**2. Parents:**

**3. Siblings:**

**4. Most Memorable Moment:**

**From school:**

**From outside of school:**

**5. Goals/Aspirations for Life:**

**6. What is your favorite season and why?**

**7. What should we (community, friends, family) remember most about you?**

**8. Who/What has inspired you to further your education or follow your intended career path?**

**9. What is the most important thing you have ever learned?**

**10. How do you imagine your life will be when you are a senior citizen?**

**11. What will you miss most from your BGM experience?**

**NOTE: This sheet will be shared with others and become a part of awards night. CSF of BGM reserves the right to eliminate or edit answers due to time constraints of the program.**