CHEMAINUS SECONDARY SCHOOL

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BURSARY/SCHOLARSHIP APPLICATION 2022-23

A.	1.	Award applied for:				
	2.	Applicant's Name				
		(Surname)	(Given Names)			
	3.	Postal Address	Postal Code			
	4.	Date of Birth	Phone Number			
	5.	Name of Mother	Occupation			
	6.	Name of Father	Occupation			
	7. Number of dependent children in family					
	8. Any special family circumstances					
	9. Post-Secondary Program					
Ultimate ambition						
College/University						
В.	<u>PI</u>	ROPOSED ANNUAL BUDGET				
	Expenses:		Income:			
	Τι	uition & Activity Fees	Savings Account			
	Text & Supplies		Parent Contribution			
			Anticipated Earnings			
Transportation		ransportation				
	Clothing & Personal Needs Miscellaneous Expense					
Total Expenses:		otal Expenses:	Total Income:			
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C.	Please attach a copy of your resume.				
D.	Please attach a copy of your transcript of marks.				
E.	Please fill in only if applicable: Coastal Community Credit Union Member Ladysmith Credit Union Member Veteran or Legion Affiliation Member				
	C.U.P.E. Union Affiliation Member				
	Eagles Affiliation Member				
	Chemainus Seniors Affiliation Member				
F.	Reasons for applying for this award: (Please be specific)				
G.	Applicant's Declaration:				
	I hereby declare that the information given in answer to all questions is true and complete in all aspects.				
	Applicant's Signature	Date			