

BURSARY/SCHOLARSHIP APPLICATION

- A. 1. Award applied for: _____
2. Applicant's Name _____
(Surname) (Given Names)
3. 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 _____

B. **PROPOSED ANNUAL BUDGET**

Expenses:

Tuition & Activity Fees _____

Text & Supplies _____

Accommodation _____

Transportation _____

Clothing & Personal Needs _____

Miscellaneous Expense _____

Total Expenses: _____**Income:**

Savings Account _____

Parent Contribution _____

Anticipated Earnings _____

Total Income: _____**Expenses – Income = Need** _____

- C. Please attach a copy of your resume
- D. Please attach a copy of your transcript of marks.
- E. If Applicable:

Member Affiliation Number: _____

- F. Reasons for applying for this award: (Please be specific)

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- 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