

APPLICATION FOR BURSARY
OFFERED BY THE LADIES AUXILIARY
TO THE ROYAL CANADIAN LEGION - BR #57

The sum fo Five Hundred dollars [\$500.00] for students entering their first term of University, Schools of Technology or Art, Nursing Programs, or other recognized college.

Applicants Name _____
[Please print] [Surname] [First name]

Date of Birth _____

Mailing Address _____

Name of High School _____

I hereby make application for the above Bursary to assist me in attending:

Name of Institution _____

Address of Institution _____

Type of Course planned _____

Signature of Applicant _____

Application forms to be completed and returned on or before September 1st.

Please mail to: Bursary Chairman, c/o Ladies Axiliary
Royal Canadian Legion - Br. # 57
5703 - 48 Ave.
Camrose, Alberta T4V 0J9

REGULATIONS:

1. Recipients must be Children or Grandchildren of Veterans, Ex-Service personnel, Auxillary or Legion Members.
2. Applicants' Parents must be permanent residents of the City or County of Camrose
3. Students must have Graduated from Camrose Composite High School, or a County of Camrose High School.
4. Students may apply in the year they graduate, or wait one year before furtherING their education.
5. Decisions to award Bursary will be made by a Committee, and will be based mainly on need.
6. Applicants must be planning to further his or her education in the coming term.
Please state chosen Instution, as well as letter of acceptance.
7. All applications must be accompanied by: **transcript of academic standing, letter of reference from School Principal, Counselor, or home room Teacher, Service record of sponsoring Veteran or Auxillary member, and a letter from Student, explaining why monies are needed.**

THE FOLLOWING IS CONFIDENTIAL INFORMATION

Present Occupation of Father _____

Mother _____

Number of dependent Children [including applicant] _____

Address of Parents _____

Telephone Number _____

If Legion Member - state Branch _____

Parents yearly income as stated on NET income line of currant Tax Return:

Father _____ Mother _____

Yearly Pension [if any] _____

Signature of Applicant _____

Signature of Parent or Guardian _____