

# BETA SIGMA PHI – ONTARIO TAU

## BURSARY APPLICATION FORM

This bursary will be awarded to a deserving female who will be pursuing post-secondary studies (in any field) and who shows dedication to her community through ongoing community involvement.

Name: \_\_\_\_\_

AWARD: \$250.00 upon receipt of evidence of enrolment to second semester at a post-secondary institution.

GRADUATION DATE \_\_\_\_\_

AVERAGE LAST TWO SEMESTERS \_\_\_\_\_

INSTITUTION YOU PLAN TO ATTEND \_\_\_\_\_

PROGRAM APPLIED FOR \_\_\_\_\_

NAME OF PARENT(S)/GUARDIAN(S) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ BUSINESS # \_\_\_\_\_

AGES & NUMBER OF SIBLINGS STILL AT HOME \_\_\_\_\_

NUMBER OF SIBLINGS AT POST SECONDARY EDUCATION \_\_\_\_\_

DO YOU WORK PART TIME? \_\_\_\_\_

HRS./WEEK \_\_\_\_\_

WHERE \_\_\_\_\_

A PERSONAL LETTER MUST ACCOMPANY THIS APPLICATION OUTLINING YOUR COMMUNITY INVOLVEMENT AND WHAT BETA SIGMA PHI MEANS TO OUR COMMUNITY (I.E WHAT DO WE DO???)

I DECLARE ALL INFORMATION TO BE CORRECT AND ACCURATE.

\_\_\_\_\_

Signature