

Unifor Local 324 ~ 2017 Bursary Application

Applicants should be the child or grandchild of a member of Unifor Local 324

Name of Bursary/Scholarship: _____

Full Name of Applicant: _____

Date of Birth: _____ Telephone Number: _____

Address: _____
Street & Number

_____ *City* _____ *Province* _____ *Postal Code*

Mailing Address: _____
(if different) _____
Site, Box, RR

_____ *City* _____ *Province* _____ *Postal Code*

Name of Parents: _____
(or Grandparent) _____ *Father/Grandfather* _____ *Mother/Grandmother*

Parents' Occupations: _____
(or Grandparent) _____ *Father/Grandfather* _____ *Mother/Grandmother*

Parents' Employers: _____
(or Grandparent) _____ *Father/Grandfather* _____ *Mother/Grandmother*

List any siblings attending College/University: _____

Contribution to School (list clubs, sports, activities, leadership)

Contribution to Community (church, hospital, seniors, volunteering)

List names of two character references (not relatives) with address and phone

1.
2.

My Post-Secondary Education Plans

In the space provided below, list the Colleges, Universities and/or other training/education that you have applied to for the fall of 2017.

University	Program	Accepted ✓

College	Program	Accepted ✓

Trades/Apprenticeship/Training/Other Education	Program	Accepted ✓

Parents are requested to make comments on behalf of their son/daughter if they so desire.

Applicant's Signature _____

Parent's Signature (if under 18 years) _____

