

The Friendly Circle of Wabigoon & Area Bursary Application – 2024

Full Name of Applicant: _____

Date of Birth: _____ Telephone Number: _____

Address: _____
Street Address

City

Province

Postal Code

Mailing Address: _____
Site, Box, RR

City

Province

Postal Code

Name of Parents/Guardians: _____
Parent/Guardian #1

Parent/Guardian #2

Parent/Guardian Occupations: _____

Parent/Guardian Employers: _____

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

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

Write in 250 words or less:

- How you meet the criteria and/or your affiliation to apply for this bursary/scholarship
- Why you should be chosen to receive this bursary/scholarship