

Bursary Application

PLEASE TYPE OR PRINT CLEARLY. ALL INFORMATION PROVIDED IS CONFIDENTIAL.

1.	Name (i	n full):								
	× ×	,	Surname			First			Middl	e
	Postal A	ddress:_								
			Town/City						Postal C	ode
	Phone:		Date of Bi						Male	Female
				N	lonth	Da	ay	Year		
	Name of Parents/Guardian:									
				Fa	ather				Mothe	er
	Alberta I	Educatio	n ID#							
2	Educatio	onal Infor	mation:							
	Educational Information:									
	Name of	Name of post-secondary institution you plan to attend:								
	Program	1:								
	Length of Program: Begins: Ends:									
				Month		Year			Month	Year
3.	Complete the following character information: (Use the back of the page if more									
	space is	needed))							
	a) Why have you chosen this course of studies?									
										Page 1 of 2
			nk Robinson Education Ce 20–104 Street, Morinville, A			0.939.4341 0.939.5520		1.888.459.4062 frec@sturgeor		
Ν	ovember 2019									

- b) What do you consider your best qualities?
- c) Explain any involvement, responsibilities, and achievements in school extracurricular activities and non-school clubs, lessons, sports, community organizations, and volunteer groups, etc.
- d) List other hobbies or leisure-time activities not mentioned above.

e) If successful in your application how do you intend to use the bursary?

4. Please provide two letters of reference from members of the community other than relatives.

In accordance with the Freedom of Information and Protection of Privacy Act (FOIP), The Sturgeon School Division is authorized and required under the provisions of the Education Act and its regulations to collect, use and disclose personal information that is necessary to provide educational programming and ensure a safe and secure school environment for students.

 Frank Robinson Education Centre
 P:
 780.939.4341
 TF:
 1.888.459.4062

 9820–104 Street, Morinville, AB T8R 1L8
 F:
 780.939.5520
 E:
 frec@sturgeon.ab.ca



Letter of Referral

Name of Applicant:				
Name of Referee:				
Address:				
-				
Phone:				
Occupation:				
Length of time you have known the applicant:				

The above individual is applying for a bursary from the Sturgeon Public Schools.

This bursary is based on

- 1. the level of the student's achievement and the effort exhibited in attaining this level,
- 2. the student's participation in co and extra curricular activities, both school and community.

Be frank in describing why you feel the applicant qualifies for the bursary. All documents will be treated as confidential. Comment briefly on:

activities	(community, school, clubs, etc.)
character	(examples of behaviour motivated by character)
abilities	(leadership, communication, special, etc.)
other pertinent information	(be specific in your examples)

Signature	Date
-	
	780.939.4341 TF: 1.888.459.4062 780.939.5520 E: frec@sturgeon.ab.ca
Sozo-log Street, Mollivitte, Ab Tok ILO F:	



Confirmation of Enrolment

Note to Student:

Students applying for a Sturgeon Public Schools bursary must provide confirmation of enrollment at a post-secondary institution. Please have the following completed and returned to the address indicated below between September 15 - 30 for the Fall Term, or January 15 - 31 for the Winter Term.

Note to Post-Secondary Institution:

Please complete the following and return to the address indicated below:

	This will confirm	n that					
			1	Name of Student			
	is currently enr	olled in					
	5		Pi	Program of Studies			
	at						
			Name of Institution				
			Ad	dress of Institution			
	as a full time s	tudent, for the pe	eriod betwee	en			
			and				
_	Month	Year		Month	Year		
Signature	and stamp/seal of Of	ficial of Institution		P	osition		
Return	F	turgeon Public Scho rank Robinson Educ 820 - 104 Street	cation Centre				
		Iorinville, AB T8R I	LO				

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