

NEW BRUNSWICK



LADIES AUXILIARY

SCHOLARSHIP  
APPLICATION FORM

Read carefully and follow the instructions **PLEASE PRINT**

1. At time of application send only high school marks.
2. Special consideration will be given to Ladies Auxiliary Members children and grandchildren; Then to veterans and their grandchildren.
3. Should you be chosen as a recipient, it will be necessary to provide a Photostat copy of your Acceptance to the University or Technical Institute of your choice.
4. Deadline date return of application is June 30.
5. If you are successful applicant, a letter will be sent to you.
6. At that time a cheque will be issue to registrar office of the institute in your name no cheque will be issued to the students.

Please fill in the following:

**PART ONE**

NAME \_\_\_\_\_ AGE \_\_\_\_\_  
HOME ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
HIGH SCHOOL ATTENDED \_\_\_\_\_

ADDRESS OF SCHOOL \_\_\_\_\_

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

AVERAGE AT GRADUATION \_\_\_\_\_

(GRADING TO BE DONE IN PERCENTAGE INCLUDE TRANSCRIPT OF MARKS FROM HIGH SCHOOL ONLY)

**PART TWO COLLEGE/ UNIVERSITY INFORMATION**

SCHOOL NAME \_\_\_\_\_

CAMPUS \_\_\_\_\_

CAMPUS ADDRESS \_\_\_\_\_

AREA CODE \_\_\_\_\_ PHONE \_\_\_\_\_

WHAT YEAR WILL YOU BE IN? FIRST \_\_\_ SECOND \_\_\_ THIRD \_\_\_ FORTH \_\_\_

COURSE OF STUDIES \_\_\_\_\_

PART THREE FINANCIAL INFORMATION

IF DEPENDENT FILL FOLLOWING  
FATHER \_\_\_\_\_ OCCUPATION \_\_\_\_\_  
MOTHERS NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_  
TOTAL GROSS INCOME OF BOTH PARENTS: \_\_\_\_\_  
NUMBER OF PERSONS SUPPORTED BY THESE INCOMES \_\_\_\_\_

IF SELF SUPPORTING; STATE INCOME \_\_\_\_\_

PART FOUR LADIES AUXILIARY OR VETERAN

ANY MEMBER OF YOUR FAMILY A VETERAN? YES \_\_\_ NO \_\_\_  
RELATIONSHIP \_\_\_\_\_

\_\_\_\_\_  
SERVICE \_\_\_\_\_ WW1 \_\_\_\_\_ WW2 \_\_\_\_\_ KOREA \_\_\_\_\_ VIETNAM \_\_\_\_\_  
PEACEKEEPING \_\_\_ GULF \_\_\_ REGULAR FORCES \_\_\_\_\_  
PARENT OR GRANDPARENT OR GREAT GRANDPARENT OF A VETERAN  
MOTHER OR GRANDMOTHER OF AN AUXILIARY MAMBER \_\_\_\_\_

\_\_\_\_\_  
WAS ANY MEMBER OF YOUR FAMILY A MEMBER OF THE LADIES  
AUXILIARY YES \_\_\_ NO \_\_\_

NAME \_\_\_\_\_ BRANCH NO \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_

SIGNATURE OF APPLCANT \_\_\_\_\_ DATE \_\_\_\_\_

EXTRA CURRICULAR ACTIVITIESS  
(VOLUNTEERING, SPORTS, PART TIME WORK,) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
RETURN TO JEAN STEVENS  
162 Loch Lomond Road  
Saint John, N.B.  
E2J 1Y1



THE AUXILIARY COMMAND  
OF  
NEW BRUNSWICK PROVINCIAL COMMAND  
THE ROYAL CANADIAN LEGION

Dear Students:

Thank you for your request for an application form for the scholarships being awarded by the New Brunswick Command Ladies Auxiliary to the Royal Canadian Legion.

As we have so many applications and so few awards, we assess your application on a point system. All information you submit is held in strict confidence, so please be careful to answer ALL questions correctly and provide us with complete and accurate information. As we do not know you personally, we must assess your application on it's merit alone. Primary consideration will be given to children and grandchildren and others affiliated to Veterans and Auxiliary Members.

If you have completed High School and are presently attending University, please include your High School graduation marks. Marks **MUST** accompany your completed scholarship application. If you have worked since graduating High School, please write and attach a summary of the intervening time.

Should you be chosen to receive one of our awards, you will be notified by mail and will then be requested to send a certified copy of your acceptance to University or Technical Institute.

Best wishes for success in your chosen field.

Yours truly,

  
Scholarship Chairman