## Local Scholarship / Bursary Application Form Grand Manan Community School

Name of Scholarship: Student Information Name:					
				Home Address:	
				Date of Birth:	
No. of Years at GMCS:					
What are your plans for Post-Secondary Study?					
Name of Eather/Guardian (indicate which):					
Name of Father/Guardian (indicate which):					
What is his work?					
Employed by whom?Address (if different from your own):					
Name of Mother/Guardian (indicate which):					
What is her work?					
Employed by whom?					
Address (if different from your own):					
Do you have a part time job?					
during the school year	_ during the summer				
Amount earned in the past year: \$					

Name and a	address of your employer:	
Extra Curricular A		
-	ositions in the community ha	ive you held?
Student Council:		
Athletics:		
Outstanding Achi		
Please name two	references who may be cont	acted for further information:
Name:	Position:	Phone No.:
The above inform	ation is true to the best of m	y knowledge and belief.
Date:	Signed:	