



IODE NOVA SCOTIA PROVINCIAL CHAPTER

2017 BURSARY

Value - \$500.00

(Applicant and family must be in financial need)



Use this form and type or print in black ink

Name: _____ School: _____

Your address: _____ City: _____

Postal Code: _____ Phone number: _____ E-mail: _____

Work Experience: _____

Volunteer Experience: _____

Accepted for post secondary education? _____ Where? _____

Amount of other bursaries received if any _____ Renewable? _____

Number of siblings at home _____ at college/university _____

Father's occupation: _____

Mother's occupation: _____

This completed application must be accompanied by:

1. A one-page signed letter stating your financial status, interests and future plans (*no resumes please*)
2. Sealed transcript of marks. (*Up-to-date at time of applying*).
3. A one-page *letter of reference* from *three* people who know you and your abilities (*principal, teacher, guidance counsellor, clergy, employer*). These letters should be signed and sealed by the writer and include their phone numbers and addresses.

Applications not having all required items will not be considered

(This information is privileged and confidential and the sender does not waive any related rights and obligations. Any distribution, use, or copying of any information it contains by other than intended recipient is unauthorized)

Please initial box if you give permission for your name to be posted on the IODE Nova Scotia Web Site

Applicant's signature

Date

Return by April 30, 2017 to: Barbara Rodney
17 Elm Street
Yarmouth, NS B5A 2P8

Do not write below this line

Mailed on _____ Application _____ Letter _____ Transcript _____ References _____