



## BURSARY AND SCHOLARSHIP APPLICATION

Please check off the award(s) that you are applying for. You may choose more than one. There may be more than one award per category and the monetary value may also vary from year to year. You may be asked to show financial need if required.

- BROKENHEAD RIVER COMMUNITY FOUNDATION SCHOLARSHIP
- BROKENHEAD RIVER COMMUNITY FOUNDATION BURSARY
- BEAUSEJOUR CURLING CLUB SCHOLARSHIP
- BROKENHEAD-THALBERG NORTH-MARS-BROKENHEAD EAST BURSARY
- ERIC LEFKO MEMORIAL BURSARY
- GERALD & DR. PAMELA HAWRANIK BURSARY FOR NURSING
- KEN MATCHIZEN MEMORIAL SCHOLARSHIP
- RADFORD AWARD FOR MATH BURSARY
- RADFORD SCIENCE BURSARY
- ROBERT RONDEAU MEMORIAL CURLING SCHOLARSHIP

**NAME:** \_\_\_\_\_ **SCHOOL:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**POST SECONDARY SCHOOL PLANS:** \_\_\_\_\_  
**COURSE:** \_\_\_\_\_ **HAVE YOU BEEN PRE-ACCEPTED:**  Yes  No

### EDUCATION: (COURSES ENROLLED IN THIS SCHOOL YEAR):

1<sup>ST</sup> SEMESTER:

COURSE NAME	FINAL MARK

2<sup>ND</sup> SEMESTER

COURSE NAME	FIRST REPORT MARK

**REFERENCES:**

NAME	POSITION	ADDRESS/PHONE/EMAIL
1.		
2.		
3.		

Please tell us what your long-term plans are for further education and a career:

**COMMUNITY INVOLVEMENT:** *(requirement for the BRCF Scholarship & Bursaries and the Brokenhead-Thalberg North-Mars-Brokenhead East Bursary...you are encouraged to fill out for other grants as well)*

Please describe the ways in which you have volunteered or served your community. Be sure to refer to your leadership skills and ability to work as a team member. You may write this on a separate sheet to be attached if not enough space.

**CURLING EXPERIENCE** *(for the Beausejour Curling Club Scholarship and the Robert Rondeau Memorial Curling Scholarship only)* A letter from your coach or curling club attesting to your involvement and good sportsmanship must accompany this application.

**FINANCIAL NEED** (required for BRCF Scholarship & Bursaries, Erik Lefko Scholarship, Gerald & Dr. Pamela Hawranik Bursary for Nursing and Brokenhead-Thalberg North-Mars-Brokenhead East Bursary) In order to appreciate your individual circumstances, requirements and need, please provide relevant details about your financial situation. Such as your educational expenses, parental support, bank loans, government loans, other scholarships, bursaries expected etc. If more space is required, please attach an additional page.

**DECLARATION OF APPLICANT**

I understand the terms and conditions and hereby make application for a Brokenhead River Community Foundation Scholarship and/or Bursary. I hereby certify that the information given in this application is true and complete; that the Brokenhead River Community Foundation is authorized to verify the information contained herein with my educational institutions and other sources identified; and that I will notify the Foundation of any changes. I understand that personal information is collected about me for the purpose of administering the Brokenhead River Community Foundation Scholarship and Bursary program and I agree to allow my name, picture, city/town of residence, institution of study, future study plans to appear publicly if I receive a scholarship or bursary.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

***APPLICATION MUST BE SUBMITTED TO THE GUIDANCE DEPARTMENT OF ECOLE EDWARD SCHREYER SCHOOL, BY MAIL TO THE BROKENHEAD RIVER COMMUNITY FOUNDATION (BOX 2225, BEAUSEJOUR, MB, R0E 0C0 OR BY EMAIL TO [brcf@brcfoundation.ca](mailto:brcf@brcfoundation.ca) BY MAY 31<sup>ST</sup>.***

***A TRANSCRIPT OF YOUR MARKS MUST ACCOMPANY THIS APPLICATION. PLEASE ENSURE YOU ALSO INCLUDE ANY LETTERS OF REFERENCE OR APPLICABLE DOCUMENTS AT TIME OF SUBMISSION AS WELL.***