Mission Community Foundation Bursary & Scholarship Application Form 2nd Year Student

Last Name:			First Name:	
Address:			City:	
Phone:			Postal Code:	
Email Address:				
Current University / Post- Secondary Institute: Current Major:				
Anticipated Degree:				
Have you received an aw	ard from the Found	datio	on in the past?	
Are you applying for awards from other institutions?				
If "yes", which inst	titution?			
year students. These sch	nolarships are dedic holars (open to any ern University – Pos nts required this form)	cated Pos	has 2 Bursaries & Scholarships available to 2nd ed as follows: (please check all that apply) st-Secondary Institute) econdary Transcript of Grades Biographical Sketch: a letter about you	
Photograph Permi			indicating your aspirations and how the funds will be beneficial to your educational pursuits and future plans	
I hereby submit my appli been dutifully signed by a	•	iew.	. I certify that all information accurate and has	
(Signature of Applicant)			(date)	

Name and Photograph Waiver and Permission Award Recipients

To commemorate the achievements of the eventual recipients of the Mission Community Foundation Bursary/Scholarship Awards, we would like to take photo of all the recipients. The names of the Award recipients and possibly a photograph will be featured on our website: www.missioncommunityfoundation.org and may appear in our Facebook page or local print media.

As such, we ask that you complete the	information below and to sign.
Name:(Please PRINT)	Phone:
Address:	City:
Postal Code:	
Email:	
	ion permission to use my name and photo to award and the work of Mission Communit
	Signature
	Name
	Date