

**LIONS MEMORIAL BURSARY
APPLICATION**

Name _____
Permanent Address _____
Postal Code _____ Phone # _____

Application Criteria

1) Academic Qualifications

Applicant must show proof that he/she has satisfied the requirements for admission to a post secondary institution (please enclose a copy of your acceptance letter).

2) Citizenship

In the space below please outline your involvement in voluntary participation in school and community activities.

3) Need

Financial need is a key element of the bursary. Please indicate if you require financial assistance.

Yes () No () If yes please provide additional details in the space below.

APPLICATION DEADLINE: JUNE 1
RETURN TO MAIN OFFICE