



(4) **University, College or Institute of Higher Learning you plan to attend**

\_\_\_\_\_

(5) **Program you plan to follow** \_\_\_\_\_

(6) **Have you been accepted at this University, College or Institute of Higher Learning?**

\_\_\_\_\_ Yes \_\_\_\_\_ No *(If yes, please enclose a copy of acceptance letter)*

(7) **Fill in the following and attach a transcript of your Grade 11 marks:**

Attended Grade 10 at \_\_\_\_\_ Average Mark for the Year \_\_\_\_\_  
*Name of high school*

Attended Grade 11 at \_\_\_\_\_ Average Mark for the Year \_\_\_\_\_  
*Name of high school*

Attended Grade 12 at \_\_\_\_\_ Average Mark for the Year \_\_\_\_\_  
*Name of high school*

(8) **Describe fully any areas of involvement in school, at home or in the community:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(9) **Briefly explain why you feel you should obtain the Beaubear Credit Union Founders Scholarship.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(10) **Are you a member of Beaubear?**

If yes, please answer: When did you become a member?

\_\_\_\_\_

**PAGE 3**

If no, please answer: Is one of your parents a member? \_\_\_\_\_

When did he/she become a member?

\_\_\_\_\_

(11) **Your parents/guardians names, address and telephone numbers**

\_\_\_\_\_

\_\_\_\_\_

(12) Please list three persons who know you well, whom the Trustees of the Scholarship may contact for a reference. Those should include one or two of your teachers, and may include a clergyman or other responsible person.

**Reference 1**

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

Occupation

\_\_\_\_\_

Phone

**Reference 2**

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

Occupation

\_\_\_\_\_

Phone

**Reference 3**

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

Occupation

\_\_\_\_\_

Phone

14. Please list any other bursaries or scholarships you have been awarded:

\_\_\_\_\_

15. Please give any further information, which you feel may assist the Trustees in considering your application.

\_\_\_\_\_

\_\_\_\_\_

# CONFIDENTIAL FAMILY INFORMATION

***MUST BE RECEIVED NO LATER THAN JUNE 1ST.***

*This page containing family information will be kept in strict confidence by the Trustees. It will be destroyed once the Trustees have made their selection.*

(1) Re: \_\_\_\_\_  
(Student's Name)

(2) Annual Family Income of 20\_\_\_\_\_  
(Total income including wages, pensions, allowances, etc.)

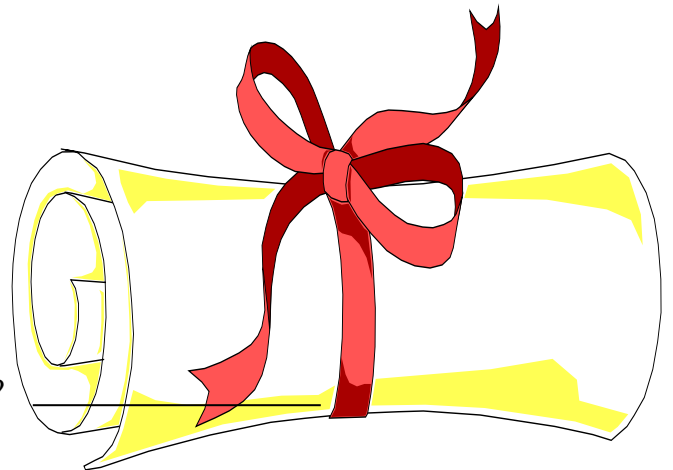
- \_\_\_\_\_ Under \$25,000
- \_\_\_\_\_ \$25,000 - \$50,000
- \_\_\_\_\_ \$50,000 - \$75,000
- \_\_\_\_\_ Over \$75,000

3. Number of persons in this household:

- Parents \_\_\_\_\_
- Children \_\_\_\_\_
- Others \_\_\_\_\_

4. How many contribute to the family income?

5. How many are supported by this income?



\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date