



**MIRAMICHI BRANCH 10  
THE ROYAL CANADIAN LEGION  
BURSARY APPLICATION**

COMPLETED APPLICATIONS INCLUDING ALL REQUESTED DOCUMENTATION MUST BE RECEIVED NO LATER THAN May 15th:

Section I: Student Information

- Print clearly or type all information requested
- You must reside in New Brunswick and be a Canadian Citizen

Section II: College/University Information

- Provide the name and address of the College, Trade School, Technical School, Community College or University you will be attending.
- Bursaries are awarded to students attending facilities on a full time basis.
- Post-graduate studies do not apply.
- \$300.00 bursaries are awarded to successful applicants.

Section III: Financial Information


- This section must be completed

Section IV: Military Service Information

- Veterans, Servicemen, etc. must have been in the Canadian or British Commonwealth Forces

**NOTE:**

- Bursaries are awarded on a point system that is based on financial need, with special consideration given to children and grandchildren of Veterans.
- All documentation to be included - copy of letter of acceptance.
- Ensure that the application is signed in the appropriate places
- Incomplete applications will not be considered - no follow-up will be taken
- Completed applications and necessary documentation must be mailed, emailed to: [miramichilegion@bellaliant.com](mailto:miramichilegion@bellaliant.com) or hand delivered to:

<b>New Address:</b> 
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**BURSARY COMMITTEE  
MIRAMICHI BRANCH 10  
THE ROYAL CANADIAN LEGION  
3-20 FOUNTAIN HEAD LANE, MIRAMICHI, NB E1V 4A1**

Please Note: If hand delivering - office hours are: Tuesday & Thursday 1-4:30 pm

**DEADLINE IS May 15<sup>TH</sup> - No exceptions - Postmarks do not count**

**Please Note:**

**Cheques for successful recipients will be mailed following receipt of confirmation of enrollment from your post-secondary institution.**

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**MIRAMICHI BRANCH 10  
THE ROYAL CANADIAN LEGION  
3-20 FOUNTAIN HEAD LANE  
MIRAMICHI, NB E1V 4A1  
EMAIL: [miramichilegion@bellaliant.com](mailto:miramichilegion@bellaliant.com)**

**BURSARY APPLICATION**

(Please print clearly giving all information requested)

<b>SECTION I - Student Information</b>	
Full Name:	
<b>Your Complete Mailing Address:</b>	
Street	(Number) _____ (Name) _____
City/ Prov/Postal Code	(City) _____ (Prov) _____ (Postal Code) _____
	Telephone # _____ e-mail: Print Clearly _____
Your Complete Mailing Address if not living at home while in school:	
Street	(Number) _____ (Name) _____
City/ Prov/Postal Code	(City) _____ (Prov) _____ (Postal Code) _____
	Telephone # _____ e-mail: Print Clearly _____
Date of Birth:	Day: _____ Month: _____ Year: _____
High School Attended	
Date of Graduation	
<b>SECTION II - College/University Information</b>	
School Name:	
Campus:	
Address:	
Phone:	
What Year will you be in?	First: ____ Second: ____ Third: ____ Fourth: ____
Course of Studies you intend to follow	

**SECTION III - Financial Information – (Must be completed)**

If Dependent:  Parent/Guardian Name: Occupation: Gross Income:	Name _____ Occupation: _____ Gross Income: _____	
If Dependent:  Parent/Guardian Name: Occupation: Gross Income:	Name _____ Occupation: _____ Gross Income: _____	
Indicate number of children under the age of 21 supported by this income.	_____ <table border="1"><tr><td>Ages</td></tr></table> _____	Ages
Ages		
If Self Supporting:	State personal income, including spouse: _____ If living in a single parent home, list income alimony and support payments of supporting parent: _____ Were you successful in applying for a student loan/grant? Yes: _____ No: _____ If Yes, what amount? _____	

**SECTION IV - Military Service Information of Veteran You Qualify Under**

Veterans Full Name:	
Indicate:	Parent: _____ Grandparent: _____ Great Grandparent: _____
Service # and/or Unit:	
	Enlistment Date: _____ Discharge Date: _____
Check as applicable	WWI: ____ WWII: ____ KOREA: ____ REGULAR: ____ RCMP: ____
Is (was) either of your Parents or Grandparents ever a member of the Legion or Ladies Auxiliary	Parents: Yes: ____ No: ____ If yes, what Branch _____ Grandparents: Yes: ____ No: ____ If yes, what Branch _____
Signature of Applicant that all information is correct:	
Signature of Parent or Guardian:	

**DEADLINE FOR APPLICATIONS TO BE RECEIVED – MAY 15<sup>TH</sup>**  
**THE DECISION OF THE BURSARY COMMITTEE IS FINAL.**