



SADDLE HILLS COUNTY BURSARY

Your personal information is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of this information you may contact Tracy Lapping, Legislative Officer, Saddle Hills County 780-864-3760 or tlapping@saddlehills.ab.ca.

Section 1 CONTACT INFORMATION (mailing address)

Last Name										First Name											
Apartment or Box Number					Street Address																
Town or City										Prov		Country					Postal Code				
Email Address										Home Phone Number					Cell Phone Number						

Section 2 PRIMARY RESIDENCE Same as above

Apartment or Box Number					Street Address																
Town or City										Prov		Country					Postal Code				

Section 3 PERSONAL INFORMATION

Have you lived in Alberta all your life? <input type="checkbox"/> Yes <input type="checkbox"/> No, since:										Month		Year		Gender			
														<input type="checkbox"/> Male <input type="checkbox"/> Female			
Have you received previous Saddle Hills County Bursary support? <input type="checkbox"/> Yes <input type="checkbox"/> No										Birthdate		Mon.		Day		Year	

Section 4 EDUCATIONAL INFORMATION

Name of Post-Secondary Institution										Town / City													
Program Enrolled in (be specific)										Program Type		<input type="checkbox"/> Diploma		<input type="checkbox"/> Masters		<input type="checkbox"/> Cert.		<input type="checkbox"/> Degree		<input type="checkbox"/> PhD			
Major / Minor										Student Identification Number													
What year of your program are you entering?					<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	Length of program		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5							
Dates you will be attending school in the upcoming school year										Anticipated graduation date?													
From:		Day	Mon	Year		To:		Day	Mon	Year		Date		Day	Mo	n	Year						
When will you be available for work?										Mon		Year		(Provide details in your career plan in Section 5)									



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Section 4 (continued)

Latest high school average ____% **or** Latest Grade Point Average ____ out of ____

(Attach a printout of your latest unofficial transcript or a copy of your latest official transcript)

Previous Post-Secondary Education

Institution	Program	Degree	Years Completed

Section 5 Write a paragraph of at least 500 words detailing your chosen field of study.

Please use separate sheet of paper and attach to application.