

## **BURSARY APPLICATION FORM**

Please Include:

- -Application Form
  -Transcript of Marks
- -Short essay on what Co-op means to you and your community

NAME OF SCHOLARSHIP: PIONE	ER CO-OP URBAN AWARD (BURSARY)
NAME IN FULL: Last Name	
Last Name	First Name
DATE OF BIRTH: Day Mont	BIRTHPLACE:
MAILING ADDRESS:	
	CELL PHONE #:
WHAT SCHOOL DO YOU NOW AT	TEND?
WHAT FACULTY DO YOU PLAN TO	DENTER AT POST SECONDARY AND WHY?
HAVE YOU BEEN ACCEPTED TO	ANY POST SECONDARY SCHOOLS? IF SO WHICH
SCHOOL(S)?	
EAMILY	
<u>FAMILY</u> <u>NAME</u>	OCCUPATION
PARENT/GUARDIAN:	
PARENT/GUARDIAN:	
PARENT/GUARDIAN CO-OP NUME	BER:
# OF SIBLINGS: AGES:	

RETURN APPLICATION TO:	PIONEER CO-OPERATIVE ASSOCIATION LIMITED  ATTN: NIKKI HARTLEY, EXEC. ASSISTANT 1150 CENTRAL AVENUE NORTH
* Interviews will be	conducted in person or virtually*
HOW ARE YOU PLANNING TO PAY	FOR YOUR POST SECONDARY EDUCATION?
ARE YOU CURRENTLY EMPLOYED	IF SO, WHERE?
WHAT IS YOUR INVOLVEMENT IN	THE COMMUNITY?
WHAT ARE YOUR EXTRA-CURRICU	ULAR ACTIVITIES IN THE HIGH SCHOOL?
WHAT HOBBIES DO YOU ENJOY?	EXPLAIN?

SWIFT CURRENT, SK S9H 0G1

admin@pioneercoop.ca

NO LATER THAN MARCH 6, 2025