Phone: (204) 731-0939

## **BURSARY APPLICATION FORM**

(Application deadline is August 20th)

Please print clearly.					
First Name:		Last Name: _			
Street Address:			City/Town:		
Province:	Postal	Postal Code:		Box Number:	
Position at camp? (Please ch	heck one.) Speaker $\square$	Cabin Leader □	Head Cook $\square$	Kitchen help □	
	Lifeguard $\Box$	Maintenance □	Program Directo	or   Waymaker Leader	
	Other $\square$ (De	escribe)			
1) Please give an approxima	ate <u>round trip</u> mileage o	f your trip to get to c	amp	Kilometres	
2) In the fall you will be a .	(check one)				
☐ Bible School Stu	ıdent.				
☐ High School Stu	dent.				
☐ Worker in Chris	tian Ministry.				
☐ Other Descri	ption:				
3) What statement best desc	cribes your financial nee	ed listed from least to	greatest? (check of	one)	
☐ Some payment v	vould be appreciated.				
☐ I am taking extra	a time off work to help of	out at camp.			
☐ Money required	personally, loan, school	or family needs.			
$\square$ I am in desperate	e need.				
4) Optional: Give a short de	escription of your situati	on			
5) Signature of applicant: _					

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\*\*\*All bursaries will be sent out in September to the given mailing address. \*\*\*