

CANDIAN HARD OF  
HEARING  
BURSARY APPLICATION



Student  
name: \_\_\_\_\_

School  
attending: \_\_\_\_\_

PERSONAL  
INFORMATION

Address: \_\_\_\_\_  
\_\_\_\_\_

Postal code: \_\_\_\_\_ Phone

#: \_\_\_\_\_

S.I.N. \_\_\_\_\_

Age: \_\_\_\_\_

POST SECONDARY PLANS

Career goal:

To which Institutions have you applied ?

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

Which one do you prefer ? \_\_\_\_\_

Have you been accepted ? \_\_\_\_\_

Program you plan to pursue: \_\_\_\_\_

Date you preferred program

Begins: \_\_\_\_\_

INCLUDE THESE DOCUMENTS

1. Career Statement – future goals and objectives.
2. Activities resume – School, Community, Work Experience, other (special circumstances)
3. Letters of Reference: Three suggested.
4. Transcript (s).
5. Any special circumstances ?

COMMENTS

( Committee Use Only)

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PLEASE COMPLETE

Bursary Committees have a very difficult time in making selections from what is always a list of worthy candidates. THE FOLLOWING CRITERIA IS REQUIRED TO MAKE A DECISION.

ACADEMIC ACHIEVEMENT Grade 11/12 courses and percent and letter grades

Subject	Mark	Subject	Mark	Subject	Mark	Subject	Mark
1		6		11		16	
2		7		12		17	
3		9		13		18	
4		10		14		19	
5		11		15		20	

School involvement / volunteerism

Community involvement / volunteerism

Leadership

Athletics (School, Community)

FINANCIAL NEED

Other.

CHHA