



IODE Nova Scotia Bursary



The applicant & family must be in financial need. This form must be used.

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone #: _____ E-mail: _____

Name of School: _____

Work Experience: _____

Have you been accepted for Post Secondary Education? _____

Where? _____

Field of Study: _____

Have you received any Bursaries or Scholarships? ____ If so, how much? _____ Renewal? ____

Number of siblings living at home _____ or attending university: _____

Father's Present Occupation: _____ Mother's Present Occupation: _____

Requirements are as follows:

1. Accompanying **one-page** letter stating your interest, future plans, and **financial status**
2. Transcript of marks, up-to-date at the time you apply
3. Letter of reference from three people (principal, teacher, guidance councillor, employer)

References:

1. Name _____ Address _____
2. Name _____ Address _____
3. Name _____ Address _____

All required references, accompanying letters and transcript must be mailed no later than **May 1** to:

Provincial Education Officer
Mrs. Charlene Greenfield
21 Benview Dr.
Dartmouth NS B2Y 1W6

Please initial box if you give permission for your name to be posted on the IODE Nova Scotia Web Site.

Applicant's Signature _____ Date _____

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