

CAMROSE CATHOLIC WOMEN'S LEAGUE BURSARY GUIDE

The bursary is administered by a CWL committee consisting of four members: the President, Education and Health Convener, Christian Family Life convener, and one other executive member.

1. To assist the youth in pursuing educational goals, the CWL offers an annual bursary of \$750.00.
2. Send your application to: The Bursary Committee
Catholic Women's League
St. Francis Xavier Parish
3605 - 50 Street
Camrose, AB
T4V 5E6
3. Applications must be received by August 30.
4. The bursary will be presented at a CWL meeting in October.

CRITERIA

1. This bursary is available to an eligible Catholic student. The student must be related to a member (mother, grandmother, or sister) of the Camrose Catholic Women's League, St. Francis Xavier Parish, or be a member herself.
2. The applicant must be a member of St. Francis Xavier Roman Catholic Parish.
3. The student's home residence must be within Camrose and district.
4. The applicant must be a graduate from grade twelve within the last two years.
5. The student must be accepted at a recognized post-secondary educational institution (University, college, technical school, Catholic Bible school). A copy of this acceptance must be included.
6. The applicant must demonstrate: financial need, reasonable effort to finance education, and academic achievement. Complete the application form, along with a transcript of grade twelve marks and the letter of acceptance from the post-secondary institution. This application will not be considered without the letter of acceptance and a transcript of grade twelve marks.

(The CWL Bursary Committee reserves the right to be flexible in the interpretation of the Criteria, depending on the applications received; priority will be given to financial need).

APPLICATION FOR CAMROSE CATHOLIC WOMEN'S LEAGUE BURSARY

(Please print neatly or type.)

Full Name: _____

Home Address: _____ (Postal Code) _____

Address during academic term: _____

Birthdate: _____ Home Phone: _____
(Month/Day/Year)

Father's Name: _____ Father's Occupation: _____

Mother's Name: _____ Mother's Occupation: _____

Applicant's part-time job: _____

Name and address of Post-Secondary Institution which has accepted applicant:

Program in which applicant is enrolled: _____

Degree or Diploma sought: _____

Length of this program: _____

ESTIMATED EXPENSES FOR ACADEMIC YEAR

Tuition _____

Board/Room _____

Books _____

Transportation _____

Incidentals _____

Total Expenses: _____

APPLICATION FOR CAMROSE CATHOLIC WOMEN'S LEAGUE BURSARY
FINANCES FOR ACADEMIC YEAR

Personal Savings _____

Part-time Job _____

Parents' Contributions _____

Other Scholarship/Bursary Awards (Name and Amount) _____

Other Sources/Gifts (Specify) _____

Total Finances: _____

Briefly, provide some information about yourself, such as special family circumstances, work experience, and involvement in church activities, volunteer work, sports, arts/music, and hobbies.

Name of related CWL Member: _____

Relationship to applicant: _____

Signature of applicant: _____

Date: _____