

Student Name _____

**WESTBORO BRANCH #480
THE ROYAL CANADIAN LEGION
STUDENT BURSARY APPLICATION**

All information is confidential. Please print or type. Information on this form must be legible.

VETERAN INFORMATION

Name _____ Relationship to Applicant _____

Military Service Number _____

Date of Enlistment _____ Date of Release _____
dd / mm / yyyy (if applicable) dd / mm / yyyy

A copy of the Military Service Record or Discharge Paper must be attached.

STUDENT INFORMATION

Name _____
Surname Given Names

Marital Status: Married _____ Single _____ Number of Dependents _____

Date of Birth _____
dd / mm / yyyy

Home Residence

Number / Street / Apt _____

Town / City _____ Prov _____ Postal Code _____

Phone Number _____ Email _____

Mailing Address (if different from Home Residence)

Number / Street / Apt _____

Town / City _____ Prov _____ Postal Code _____

Student Name _____

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POST – SECONDARY INFORMATION

Name of Institution _____

Address _____

Course / Program _____

Duration (years) _____ I am registered in year _____

Student ID Number _____

Signature

Date

Student and / or parent to be available for interview prior to Bursary Committee meeting.

Additional information related to this application that you feel is important.
(To be completed by student. Use additional sheet if necessary.)
