



*District of Wells*  
*Post-Secondary Bursary Application*

Application Deadline:

May 31, 2017 at 5:00 pm

Submit to the District of Wells office – 4243 Sanders Avenue, Wells, BC V0K 2R0

All Information will be kept Confidential - PRINT NEATLY

**CONTACT INFORMATION**

Name		SIN
Address		
Phone		Email

Name of Parents/Guardians	
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What year did you graduate gr. 12?	Do you currently live in Wells?	How long have you lived in Wells?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**EDUCATION HISTORY**

What is your highest level of education? (Please check only one)	
	Grade 12
	Grade 12 and some college or university courses
	College Diploma/Certificate
	University Undergraduate Degree
	Post Graduate Degree
	Other (please specify)

## FUTURE EDUCATIONAL GOALS

Name of post-secondary institution you are planning to attend either online or in-person:			
What course of study do you plan to follow:			
Will this course of study lead to (check one of the following): Other—specify here:			
<input type="checkbox"/> Certificate	<input type="checkbox"/> Diploma	<input type="checkbox"/> Bachelor Degree	<input type="checkbox"/> Post Graduate Degree
How long is the program?			
Have you been accepted by the institution yet?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing address of the institution: (If successful the bursary cheque is issued directly to the post-secondary institution)			
Are you: <input type="checkbox"/> full time student (min. 4 courses) or <input type="checkbox"/> part time student (less than 4 courses)			
Will you be attending this coming September?		<input type="checkbox"/> Yes <input type="checkbox"/> No: If no, when:	

## ACCOMPLISHMENTS

**AWARDS:** Please list the awards and commendations you have received since grade 7. If you require more space, please attach an additional sheet(s).

Year	Institution	Award

**OTHER CERTIFICATES:** Please list any certificates you have received (example: Super Host, Food Safe, etc).

Year	Certificate

**SCHOOL & COMMUNITY INVOLVEMENT:** Please list all information regarding any school or community involvement in which you have participated. If you require more space, please attach additional sheet(s) to this form.

Years	Group Name	Your Position	Your Activities

**AUTHORIZATION**

I have reviewed the application information. All of the information provided is valid and correct.

Parent/Guardian Signature \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date: \_\_\_\_\_

**REQUIRED ATTACHMENTS**

- Ensure that each question has been answered and that all three (3) pages of the application are submitted;
- Write a one page, single spaced, computer written essay outlining your: citizenship goals, educational goals, personal goals, and why you deserve this award.
- Provide at least one letter of reference from a teacher, coach, or supervisor who can attest to your character and your ability to succeed with your educational goals.
- Provide a copy of transcripts from grade 11 and 12 (partial transcripts if you are currently in grade 12).
- Copy of acceptance by post-secondary institution

**District of Wells will not make exceptions for late entries or incomplete applications.**

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 Enquiries: [office@wells.ca](mailto:office@wells.ca) or [marketing@wells.ca](mailto:marketing@wells.ca) or 250-994-3330