

Hastings Highlands Public Library Student Bursary Application

Applicant Information						
Full Name:				Date:		
	Last	F	irst	М.І.		
Permanent Address:						
	Street Address				Apartment # / R.R. #	
	Town			Province	Postal Code	
Phone:			Email			
Age:		Socia	al Insurance No.:			
High School	l attended:					
Date of Grad	duation:					
		Month	Year			
		Post ·	 Secondary Educat 	tion		
Name of Po	st-Secondary Prog	ıram:				
Name of Post-Secondary School / Employer for Apprenticeship:						
Brief Bio						
(Please include information about your career aspirations – under 150 words)						

Disclaimer a	nd Signature
I certify that my answers are true and complete to the be-	st of my knowledge.
I certify that I will be attending post-secondary education	(college, apprenticeship, university).
Signature:	Date:

Scan and email your completed application by June 19th , 2020 to: Mr. R. Moffitt ceo@hastingshighlandslibrary.ca