# Legion

### **THE ROYAL CANADIAN LEGION**

METROPOLITAN BRANCH 594, 5030 Howard Avenue, Tecumseh, ON. N9H 0M3 PHONE: 519-969-0551 FAX: 519-969-1591

email: <a href="mailto:metrolegion594@gmail.com">metrolegion594@gmail.com</a> Website: www.rcl594.com



## **Bursary Applicant Information**

(Please neatly print all information)

Name:	Age:	Social Insurance Number:					
Home Address:	City:	Postal Code:					
Cell Phone:	Email: _						
Education: Secondary School attended:		Yr. Graduated:					
University, College, or School attending:							
Address:							
Program Registered in:							
Length of Program:	Year You A	re Registered In:					
Degree, Diploma, or Certificate you will r	receive upon s	uccessful completion of program:					
Did you volunteer in last year's Poppy Ca	ampaign?						
Would you volunteer in this year's Poppy	Campaign? _						
Checklist: Before handing in your applica	ation, ensure y	ou have all the following:					
Bursary Applicant Information For	rm						
Bursary Applicant Parents Informa	ation Form						
Bursary Sponsor Information Form (only if the applicant is not a member but being sponsored by an Ordinary or Associate member							
Official Registrar Document to ver	rify applicant'	s program					

Declaration	<u>by</u> A	pplicant <u>:</u>
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I hereby declare that all the information on this application to be correct. The RCL 594 Bursary									
Committee reserves the right to authenticate all information pertaining to the application prior to any									
decision being given. Applicants will be notified by e-mail. The decision of the Bursary Committee is									
final and cannot be appealed.									
Applicant and sponsor agree to have their names and pictures posted on RCL 594 social media sites.									
Applicant Signature: Date:									

PLEASE MAIL OR HAND DELIVER THE BURSARY APPLICATION TO RCL BRANCH 594

BY NO LATER THAN JULY 9, 2021

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#### **BURSARY APPLICANT'S PARENT INFORMATION**

(Please neatly print all information)

Mother's Surname:	First Name:	
Father's Surname:	First Name:	
Address:	City:	
Home Phone:	Cell Phone:	
Mother's Email	Father's Email	
Mother's Signature		
Father's Signature		

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## **Bursary Sponsor Information**

(Please neatly print all information)

Na	me:			
M	embership Number:			
Re	lation to Applicant:(self, parent, grand			
Cc	(self, parent, grand mplete the following:	lparent)		
	I have participated in last year's Poppy Campaign	YES	NO	
>	I have participated in a prior Poppy Campaign	YES	NO	
>	Do you attend Monday Seniors	YES	NO	
	I attend General Meetings	YES	NO	
	How many meetings have you attended in the last	12 months		?
	Which Branch Sport Activities do you actively suppor	t?		
	Cards, golf, darts, pool, etc.			
>	What fundraising activities to you support?			
	Social Events, Spaghetti Dinner etc.			
<u>De</u>	claration by Sponsor:			
	I hereby declare that all the information on this app	plication to be	correct	. The sponsor agrees to
ha	we their names and pictures posted on RCL 594 social n	nedia sites.		
Sp	onsor Signature: D	ate:		