DATE: NAME:

ROYAL CANADIAN LEGION –Montgomery POPPY FUND

BURSARY APPLICATION

**All information is confidential. This form must be legible PLEASE PRINT OR TYPE.**

**SERVICE AND INFORMATION**

Ex-service member’s name:

Relationship to Applicant: (Explain is surname is different from yours)

Military Service Number: (copy of service records must be attached)

Date of Enlistment: Date of Release:

 DD/MM/YYYY DD/MM/YYYY

**GENERAL INFORMATION**

NAME:

 Surname Given Names

Marital Status: Married: Single: x # of Dependants:

Date of Birth: Place of Birth:

 DD/MM/YYYY

Present Address:

 Apt # City or Town:

 Prov: Postal Code:

 Phone #:

Signature of Applicant:

DATE: NAME:

Mailing Address (if different from above):

**POST SECONDARY INFORMATION**

Institution Name and **complete** address:

Your course or program

Duration: I am registered in year: Student ID #

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:

Signature of Applicant:

DATE: NAME:

Signature of Applicant: