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## ALGONQUIN PARK FORESTRY BURSARY APPLICATION FORM

Applicant's Name:	
Telephone:	
Mailing Address:	
Email:	
Date of Birth:	Yrs. of Secondary Ed: Age in graduating year:
College/University (s) ap	oplied to or expected to attend and program:
<ul> <li>Submit no more that Include personal quality</li> <li>Request a transcript</li> </ul>	CATION:  n one page explaining why you would be a good candidate for this award. alities, financial need, academic achievement, your personal connection with articipation in extracurricular activities, your triumphs, goals and aspirations. To fyour marks from your guidance department and include it with your application OR SUBMISSIONS IS 4:00 p.m. on FRIDAY, MAY 17, 2019.
Please forward information Canada Post Algonquin Forestry Authors 222 Main Street West Huntsville, ON P1H 1Y' Or Email: cindi.sandiland	ority
Family connection to Fo	rest Management in Algonquin Park No Yes
Connection / relationship	)

