



BURSARY APPLICATION FORM

Student name: _____

Age: _____ Telephone no.: _____ Contact no.: _____

Address: _____

_____ Parish: _____ Postal Code: _____

If you attend school, which one? _____

What other extra curricular activities are you involved in? _____

Which instrument(s) do you study? _____

How long have you studied it/them? _____ Teacher's name: _____

How long is your lesson? 1 hour 45 mins 30 mins Will this change? _____

Personal Financial Information

Parent(s) or Guardian name: _____

Relationship to student: _____ Employer's name: _____

Other dependents: _____ Reason: _____

Household income: \$ _____ (include salaries, pension, child support, rents)

If the household receives Social Assistance, how much? \$ _____ for _____

Do you own or rent your home? _____ Monthly rent or mortgage? \$ _____

Please detail any other financial considerations that you think might be applicable to your application: _____

Date submitted: _____ By: _____

Due Date: 31st May Office: _____

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BURSARY RECOMMENDATION FORM

In recommending a student for a Bursary, Faculty members must consider the following criteria:

- Talent and ability
- Performing excellence
- Proven educational commitment
- Family support

Name of student: _____

Length of time taught: _____ Class length: _____

I am recommending this student for Financial Assistance because:

Date: _____ Teacher: _____

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