

## 2018 Post Secondary Scholarships

## **APPLICATION FORM**

PERSONAL INFORMATION	
Applicant Surname:	Given Name(s):
Address:	
Telephone Number(s):	Email Address:
EDUCATION	
Graduating High School:	
Post-Secondary Institution:	Program of Study:
Start Date:	
UNION	
Affiliated Union:	Union Member:
	Relationship:

I certify that the information provided in this application is true and correct. I also approve the use of my essay to be used by Trades NL for promotional purposes such as newsletter, advertising and digital media.

Applicant Name (print):	Applicant Signature:	Day	Month	Year

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