

APPLICATION FORM

School District No. 46
(Sunshine Coast)



CLIFFORD SMITH FINE ARTS BURSARY

A COMMUNITY ENGAGED IN THE PURSUIT OF LIFELONG
LEARNING AND EDUCATIONAL EXCELLENCE

Name of Student _____
Surname Given Names

Mailing Address _____

(Town) (Postal Code)

Name of Parent or Guardian _____ Home Phone No. _____

Date of Birth _____ Social Insurance No. _____

School _____ Anticipated Graduation Date _____

REFERENCES: LIST AT LEAST TWO (MORE IF YOU WISH) FROM WITHIN YOUR SCHOOL
OR THE COMMUNITY, WHOSE REFERENCES YOU HAVE ATTACHED.

	NAME	ADDRESS
(a)	_____	_____
(b)	_____	_____
(c)	_____	_____

PLEASE LIST ALL COURSES, EXHIBITIONS, COMPETITIONS, IN THE FINE ARTS IN WHICH
YOU HAVE BEEN INVOLVED, OR AWARDS YOU HAVE RECEIVED:

1. COMMENTS OR INFORMATION WHICH WOULD BE OF SPECIAL INTEREST TO THE DISTRICT'S SELECTION COMMITTEE. (Attach a separate sheet if more space is needed.)

2. DESCRIBE YOUR PRESENTATION (topic, format, equipment needed).

3. STATEMENT REGARDING YOUR FUTURE EDUCATION PLANS: _____

4. STATEMENT REGARDING YOUR CAREER AMBITIONS IN THE FINE ARTS:

DECLARATION: I declare that the above information is, to the best of my knowledge and belief, correct.

Date: _____ Signature of Applicant: _____

Date: _____ Signature of Principal: _____