

APPLICATION FORM
STUDENT BURSARIES



Name :

Address :

Telephone :

Email :

Please indicate your school :

- | | |
|--|--|
| <input type="checkbox"/> Collège régional Gabrielle-Roy | <input type="checkbox"/> École régionale Saint-Jean-Baptiste |
| <input type="checkbox"/> Institut collégial Saint-Pierre-Jolys | <input type="checkbox"/> École Saint-Joachim |
| <input type="checkbox"/> École communautaire Réal-Bérard | <input type="checkbox"/> Lorette Collegiate |
| <input type="checkbox"/> École communautaire Saint-Georges | <input type="checkbox"/> Ross L. Gray School |
| <input type="checkbox"/> École Pointe-des-Chênes | <input type="checkbox"/> Ste. Anne Collegiate |
| <input type="checkbox"/> École Powerview School | <input type="checkbox"/> Other |

Please indicate which branch you (or one of your parents) are a member :

- | | |
|--|--|
| <input type="checkbox"/> La Broquerie | <input type="checkbox"/> Saint-Jean-Baptiste |
| <input type="checkbox"/> Letellier | <input type="checkbox"/> Saint-Joseph |
| <input type="checkbox"/> Lorette | <input type="checkbox"/> Saint-Malo |
| <input type="checkbox"/> Richer | <input type="checkbox"/> Saint-Pierre-Jolys |
| <input type="checkbox"/> Saint-Adolphe | <input type="checkbox"/> Sainte-Agathe |
| <input type="checkbox"/> Saint-Georges | <input type="checkbox"/> Sainte-Anne |
| | <input type="checkbox"/> South Junction |

Please indicate the institution and course of study in which you are enrolled :

I authorize Caisse La Prairie to contact the principal or a teacher at my school as a reference :

- Principal Teacher

Student's signature

Date