



AFAC 200 Wing Summerside Bursary Application



Name of Applicant: _____

Address: _____ Telephone: _____

Parent/Guardian: Name: _____

Address: _____

Parent (s)/Guardian (s) Occupation: _____

Outline savings, awards, etc. and your employment plans to finance your education:

Name of post-secondary institution and program which you plan to attend:

Outline in a paragraph or two, Air Cadet experience and background (if applicable).
Please attach.

Briefly explain why you feel you may be a worthy recipient of this award:

**Return to: 200 Summerside Wing AFAC
P.O. Box 1513
Summerside, PE C1N 4K4**

Deadline for Applications: May 15, 2011