

Municipalities Newfoundland and Labrador Awards

Municipalities Newfoundland and Labrador, the acknowledged spokesperson for municipal government agreements within the Province and a strong supporter of education and training, is pleased to sponsor a scholarship and a bursary each valued at \$500.

Municipalities Newfoundland and Labrador Bursary

Donor: Municipalities Newfoundland and Labrador

Number of Awards: One

Value: \$500

Criteria: This bursary is limited to the sons, daughters or wards of municipal elected officials (Mayors, Deputy Mayors, Councilors) or Municipal Staff. The recipient must be enrolled full time in certificate or diploma level program offered at the College. Preference will be given to second or third year students enrolled in a two or three year diploma program. However, if there are no eligible applications from 2nd or 3rd year diploma students, students in their first year of a certificate or diploma program, who are either sons, daughters or wards of municipal elected officials, may be considered. The bursary will be awarded to the student who demonstrates the greatest financial need and academic merit.

A Municipalities Newfoundland and Labrador Awards application form, a College Financial Statement Form and College Reference Form are required. Industrial Trades students must include a College Transcript or Student Progress Report. Incomplete application forms will not be considered. Deadline for applications is mid-January. Please see application form for exact date. Application forms are available on the College website.

Please see application on next page.



Application must be received by Student Services office by January 23, 2023

Name: _____ Student #: _____

Address: _____

Phone #: _____

E-mail: _____

Program: _____

Campus: _____

Applicant Checklist:

- A College Financial Statement Form is attached
- A College Reference Form is attached
- A College Transcript or Student Progress Report is attached (for Industrial Trades students only)

Number of Awards: One
 Value: \$500

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Are you a child/ward of a municipal elected official or employee in Newfoundland and Labrador? If yes, please provide name of the official: _____

Your relationship to the municipal official: _____

Permanent mailing address of the municipal official: _____

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

I hereby make the following declaration:

1. I intend to be a full-time student for the academic year/semester for which this application is made.
2. I have answered all questions, which are applicable to me, and the answers given by me are true.
3. I understand that if selected for an award / scholarship/ bursary I will be required to provide my Social Insurance Number, so that a T4A may be issued for income tax purposes.

Permission is hereby granted for the Awards Committee to obtain any further information required from appropriate individuals or agencies.

I further acknowledge that my personal information (i.e. photo, video, name, program and home community) may be shared with the donor of this award and can be used by CNA for promotional purposes.

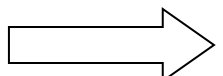
CNA is an educational body of the Government of Newfoundland and Labrador. CNA is, therefore, subject to the Access to Information and Protection of Privacy Act (ATIPPA). Learner Services is collecting your personal information to process this scholarship application. It will only be used for this purpose. This personal information is collected under the authority of the College Act, 1996 (SNL1996 CHAPTER C-22.1). All personal information will be stored in accordance with our normal network and information security measures. Personal information will only be disclosed as required to do so by law. For further information about the collection and use of this information please contact the Provincial Awards Chairperson at 709-643-7880. For more information about the ATIPPA please visit www.cna.nl.ca/about/atippa.asp.

I have read and understand the Privacy Statement above and consent to the collection and use of this personal information.

 Name: Print or Sign

 Date

Please Turn Over





**To be completed by the Mayor, Clerk or Manager of the Municipality:
(PLEASE PRINT)**

I certify that the above student is a child or ward of an elected official or employee in

Name of Municipality: _____

CERTIFIED BY:

NAME: _____

TITLE: _____

CONTACT NUMBER: _____

CONTACT E-MAIL: _____

SEAL