Professional Municipal Administrators (PMA) Entrance Bursary *New

Donor: Professional Municipal Administrators (PMA)

Number of Awards: One Value: \$1,000

Criteria: This bursary is limited to the sons, daughters, or wards of PMA Members (Chief Administrative Officers, Town (City) Clerks, Town (City) Managers or other positions as determined by PMA's membership criteria. Awarded to full-time student currently enrolled in any year of any certificate or diploma level program. The bursary is based on financial need and academic merit.

A PMA application form, a College Financial Statement Form and College Reference Form are required. Industrial Trades students must include a Student Progress Report for courses that are still in progress and not on their college transcript. 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.



Professional Municipal Administrators (PMA) Entrance Bursary

Application must be received by Student Services office by January 22, 2024

Name:	Name:Student #:		
Address:			
City:	Prov:	Postal Code:	
E-mail:		Phone #:	
Program:		Campus:	
Year of Program: 1 st □ 2 nd □ 3	grd		
Applicant Checklist: ☐ A College Financial Statement Form is ☐ A College Reference Form is attached ☐ A Student Progress Report (Industrial Report for courses that are still in	d Trades students		
Number of Awards: One Value: \$500 Criteria: This bursar Members (Chief Administrative Officers, positions as determined by PMA's mem enrolled in any year of any certificate or d need and academic merit.	Town (City) Cle bership criteria. <i>F</i>	Awarded to full-time student currently	
Are you a child/ward of a PMA member (City) Managers or other positions?	(Chief Administra	ative Officers, Town (City) Clerks, Tow	
If yes, please provide name of the official:	<u>.</u>		
Your relationship to the PMA member? :_			
Permanent mailing address of the PMA m	nember:		
M/a who has a client		Discourse	
Work location:		Phone:	
INCOMPLETE APPLICA		OT BE CONSIDERED	
I hereby make the following declaration		ou/someostor for which this	
application is made.	intend to be a full-time student for the academic year/semester for which this application is made. have answered all questions, which are applicable to me, and the answers given by me		
are true.			
 I understand that if selected for an my Social Insurance Number, so t 		hip/ bursary I will be required to provid e issued for income tax purposes.	
Permission is hereby granted for the Awa from appropriate individuals or agencies.	ards Committee to	obtain any further information required	
I further acknowledge that my personal in community) may be shared with the dono purposes.			
College of the North Atlantic is an educational body of the Go Information and Protection of Privacy Act, 2015 (ATIPPA). To are collecting your personal information to process the scholar donor. This personal information is collected under the author information will be stored in accordance with our normal network collection and use of this information please contact the Proving Stephenville, NL A2N 2Z6. For more information about the AT	he college's Student Servic urship application. The per rity of the College Act 1990 work and information secu- incial Awards Chairperson	tes Department and the Alumni & Advancement Office is onal information you provide may be disclosed to the 6 (SNL1995, Chapter C-22.1). Collected personal rity measures. For further information about the 1 at 709-643-7880, 432 Massachusetts Dr. P.O. Box 5400	
I have read and understand the Privacy Statement information.	ent above and conse	ent to the collection and use of this personal	
Name: Print or Sign		Date	