



MPWWA  
Box 28142  
Dartmouth, NS  
B2W 6E2  
PH: 902-434-8874  
Fax: 902-434-8859

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## MPWWA Education Bursary Application Form

**Applicant Name:** \_\_\_\_\_

**MPWWA Member Name:** \_\_\_\_\_ **Member Number:** \_\_\_\_\_

**Program Enrolled:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, Province:** \_\_\_\_\_, \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**A submission in written form of a short essay indicating who you are, what you are planning on taking, and where and what you hope to see as your future shall be submitted with the above application.**

**Due Date:** July 3, 2017

**Selection:** Selection will be based on the principle of open and equal opportunity and carried out by the Educational Bursary Committee. Their decision will be final. The award winners will be announced July 17, 2017.

Thank you for your submission and good luck!