

**Shana Megan Budnaryk Memorial Fund
Academic Bursary Application Form**

Name of Applicant:		Email:	
Home Address:		City:	Postal Code:
Phone:		Cell phone:	
High School:			Graduation Year
Age:	I plan to attend (name of educational institution in Canada)		
To pursue studies in (name of program)			

Application Criteria:

- This academic bursary is for an award of \$275, and will be awarded to a University/College Student in Canada registered at a valid educational institution in Nursing.
- You must be a student who graduated from high school in Kamloops & Area.
- Preference will be given to students who meet the criteria of financial need, demonstrate academic excellence and have a record of community service.

Application Checklist (all applications due September 30th Annually):

- ✓ This Application filled in.
- ✓ A letter written by the student about their financial need, academic study, volunteer pursuits, community involvement and why they are an excellent scholarship candidate. (max 2 pages)
- ✓ 2 Letters of Reference from persons involved with the student's community service pursuits.
- ✓ Student's most current academic transcripts.
- ✓ *Optional Item - a current photo of the student, which may be used for online/in-print promotional materials. (This will not be included with your application package but will be used by the Foundation for promotional purposes if you receive an award)*

I hereby make application for the Shana Megan Budnaryk Memorial Fund Academic Bursary. I understand that if I am awarded this bursary the funds will be directed to my account at the University/College in Canada where I am registered. The BC Interior Community Foundation may publicly announce the award made, noting the amount of the funds and naming me as a recipient, as well as publishing any photo I have provided online or in-print (photo is optional, and will not affect your application).

I declare that all the information that I have provided with this application is true and accurate. If any information is inaccurate, I understand that this award may be reassessed and/or withdrawn.

Signature of Applicant: _____ Date: _____

Submit this form and any other required information to the BC Interior Community Foundation by email: scholarships@bcicf.ca or drop off/paper mail: BC Interior Community Foundation, 2 – 219 Victoria Street, Kamloops, BC V2C 2A1 before September 30th. Incomplete applications will not be considered.