



AAAF MEMORIAL BURSARY
Due September 1st to your local Agricultural Fieldman

I hereby apply for the AAAF Memorial Bursary to assist me in an **AGRICULTURAL or ENVIRONMENTAL SCIENCE** related program at _____ in the term beginning _____.

Attached is a letter of acceptance from this institution.

NAME _____ EMAIL _____

ADDRESS _____

PHONE _____

EDUCATION Last Grade Completed _____ Number of Credits _____ (Attach Transcript)

High School Attended _____

Other _____

School or Community Activities in which I have participated:

Year	Activity	Position Held
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_____	_____	_____
_____	_____	_____
_____	_____	_____

(If room is insufficient, use the back of this sheet or attach a separate page)

COURSE OF STUDIES PLANNED:

CAREER PLANS UPON COMPLETION:

NAME OF PARENT OR GUARDIAN:

ADDRESS:

1. _____

2. _____

I declare that the above and attached information is correct to the best of my knowledge, and if I am awarded a bursary, I will comply with all related regulations to this application.

SIGNATURE

DATE

Personal information is being collected by authority of the Association of Alberta Agricultural Fieldmen AAAF Memorial Bursary Policy and will be used in the application process. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the AAAF Secretary Treasurer.

Submit Applications to:

Name: M.D. of Wainwright No. 61 c/o James Schwindt or Tanis Ponath

Address: 717 – 14th Avenue Wainwright, Alberta T9W 1B3

Email: agfield@mdwainwright.ca or asb@mdwainwright.ca

Phone Number: (780)842-4454

Fax: (780)842-2463