



YWCA Hamilton
MacNab Branch & Head Office
75 MacNab Street South, Hamilton, Ontario L8P 3C1
Phone: 905.522.9922 Fax: 905.522.1870

YWCA Hamilton
Ottawa Branch
52 Ottawa Street North, Hamilton, Ontario L8H 3Y7
Phone: 905.522.9922 Fax: 905.545.7470

Empowering women, building community, changing lives.

CONFIDENTIAL

APPLICATION FORM OLGA CLOKE BURSARY - 2008

I wish to be considered for the Olga Cloke Bursary offered by YWCA Hamilton and Zonta Club 1 of Hamilton and by my signature on this form, I authorize YWCA Hamilton to collect the information below and also from my references listed by me here for the purpose of evaluating my application.

PLEASE PRINT CLEARLY

Name of Applicant:		
Address:		Apt #:
City:	Postal Code:	Phone # (Day): (Evening):
Email:		
Proposed Course of Study:		
Tuition Fees: (excluding books and supplies)		
Name of Educational Facility:		
I have been accepted into this institution/ program <input type="checkbox"/> Yes <input type="checkbox"/> No		
Tell us why you need/deserve this bursary and what career you plan to pursue? (Be specific about your aspirations – if more room is needed, please attach no more than one additional page to application)		
How will the bursary help you to achieve your educational/career goals? What will you use it for?		

What was your gross income in 2007?
\$

Do you receive support from anyone else (parents, spouse, other family or friends) Yes No

How much of your own resources will you be contributing towards your fees (personal savings, earnings)
\$

Have you applied for or received any other scholarships? Yes No

Value \$

List two references, other than relatives, who are familiar with your career goals, aspirations and financial circumstances.

Reference 1
Name and Occupation:

Address: Apt #:

City: Postal Code: Phone # (Day):
(Evening):

Email:

Reference 2
Name and Occupation:

Address: Apt #:

City: Postal Code: Phone # (Day):
(Evening):

Email:

DECLARATION: I, the undersigned, hereby declare that, to the best of my knowledge, the information given in this application is true in all respects;

Dated at: _____ 2008 _____
Signature of Applicant

This application must be filed with YWCA Hamilton no later than June 13, 2008

Send to:
Olga Cloke Bursary
c/o Kim Freeman
YWCA Hamilton
Head Office Administration
75 MacNab Street South
Hamilton, Ontario L8P 3C1