COMOX VALLEY NATURE (CVN) BURSARY

APPLICATION FORM -- PAGE 1

NAME:	SIN:		
PERMANENT ADDRESS:			
CITY/TOWN:	POSTAL CODE:		
PHONE/CELL#:	EMAIL:		
GRADUATING FROM: G.P.VANIER	HIGHLANDMARK ISFELDOTHER		

POST-SECONDARY INSTITUTIONS APPLIED OR APPLYING TO:

Name and Location of Institution	Program of Study and Faculty	Length of Program	Status of Application (have applied, will be applying or have been accepted)

Briefly describe any past and/or current involvement in environmental and natural history-related activities. Please provide the name and phone number of at least one reference who can speak to your experience.

NAME:	PHONE NO. :	
NAME:	PHONE NO.	
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Indicate in 500 words or less how your career objectives and goals support the mandate and activities of CVN:



Please note:

If you become a recipient of our bursary, you may be invited to speak at one of our meetings to present a tenminute report on your studies/project. This event offers an opportunity for recipients to say thank you to the CVN community. It also gives our donors a chance to meet the students they are so proud to support.

Questions regarding the bursary application may be directed to Barbara Neilson at <u>cvnbursary@gmail.com</u>.