

## **CO-OPERATORS BURSARY FOR STUDENT MEMBERS APPLICATION FORM**

Personal Information			
Name:			
Address:			
Phone: (home)		(cell)	
Email address:			
NBASW Information			
NBASW student members	ship #:		
How long have you been	a student member with t	he NBASW?	
Academic Information			
Please provide the follow sheet and attached to this	<del>-</del>	space is required, please list	on a separate
School of Social Work in v	vhich you are currently e	nrolled: (please check one of	the boxes)
Mi'kmaq/Maliseet	: BSW programme		
Université de Mon	octon		
St. Thomas Univer	sity		
Level	Institution Location	Graduation	Year
Bachelor			
Master			



## **Short Essays**

The Education Committee will assess your application based on the following questions: *Please type your answers, there is a maximum 400 words for each question.* 

Why did you choose to pursue your studies in social work? What is your vision?



Describe what you consider to be your most significant community involvement to date.			
	ded in this application is accurate and true. I onsidered if any false information is included.		
Signature	Date		

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