



**Agricultural Service Board Bursary Application**

**Name:** \_\_\_\_\_  
Surname First Name Middle Name

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Name of Parents or Guardians:** \_\_\_\_\_

**Address of Parents or Guardians:** \_\_\_\_\_

**Occupation of Parents or Guardians:** \_\_\_\_\_

**Educational Plans:**  
**Post-Secondary Institution you plan to attend:** \_\_\_\_\_

**Course applied for:** \_\_\_\_\_

**Financial Status:**  
**List other Scholarships received:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Record of Education:**  
**Elementary School Attended:** \_\_\_\_\_

**High School Attended:** \_\_\_\_\_

**Other Educational Institutions Attended:**

<i>Institution</i>	<i>Year Graduated</i>	<i>Course</i>	<i>Diploma/Certificate</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**List Awards or Achievements received:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Record of Activities:**

**List School Activities and Organizations in which you have participated:**

<i>Club/Activity</i>	<i>Offices Held/Special Responsibilities</i>
_____	_____
_____	_____
_____	_____

**List Community Activities and Organizations in which you have participated:**

<i>Club/Activity</i>	<i>Offices Held/Special Responsibilities</i>
_____	_____
_____	_____
_____	_____



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**Other Extracurricular Activities:**

<i>Name</i>	<i>Project</i>	<i>Years as a Member</i>	<i>Offices Held</i>
_____	_____	20____ to 20____	_____
_____	_____	20____ to 20____	_____
_____	_____	20____ to 20____	_____
_____	_____	20____ to 20____	_____
_____	_____	20____ to 20____	_____

**Additional Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment Record:**

List the jobs you have held, beginning with the most recent:

<i>Years Employed</i>	<i>Name of Employer</i>	<i>Address of Employer</i>	<i>Type of Work</i>
20____ to 20____	_____	_____	_____
20____ to 20____	_____	_____	_____
20____ to 20____	_____	_____	_____
20____ to 20____	_____	_____	_____

**References:**

Please contact a suitable person in each of these categories and have him / her complete the attached reference form.

1. School Principal / Teacher
2. One person concerning your Community Activities
3. One person concerning your Extra Curricular Activities

**Transcript of Marks:**

Please make arrangements to have transcripts forwarded from the Registrars' Office of your University or College as soon as they are available.

Grade 12 Students: Please complete the "Transcript Request" form attached to this application and mail it to Alberta Education.

I declare the foregoing information is correct and that if I am granted one of these awards, I will comply with its terms.

_____	_____
Signature of Applicant	Date

I hereby confirm the statements made above and declare that they are correct to the best of my knowledge.

_____	_____
Signature of Parent or Guardian	Date

**Applications must be received by July 31<sup>st</sup>, 2017 by mail, email or fax.**

Please send to:

**Glen Kummer**  
**Agricultural Services Manager**  
**Lac Ste. Anne County**  
**Box 219**  
**Sangudo, AB**  
**T0E 2A0**  
**Phone: 780-785-3411**  
**Facsimile: 780-785-2985**  
**Email: [gkummer@lsac.ca](mailto:gkummer@lsac.ca)**



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**Agricultural Service Board Reference Form**

*Educational Reference (Principal, Vice Principal or Teacher)*

**Name of Applicant:** \_\_\_\_\_  
Surname First Name Middle Name

**Name of Reference:** \_\_\_\_\_  
Surname First Name Middle Name

**Occupation of Reference:** \_\_\_\_\_

**Address of Reference:** \_\_\_\_\_

**Phone Number of Reference:** \_\_\_\_\_

**Please comment briefly about the applicant in reference to each of the subjects listed below:**

**1. Activities (School, Community, 4H)**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Character**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Abilities**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Other Pertinent Information**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***This completed form must be received no later than July 31<sup>st</sup>, 2017 Please send to:***

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Agricultural Services Manager  
Lac Ste. Anne County  
Box 219  
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T0E 2A0  
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**Agricultural Service Board Reference Form**

*Extra-Curricular (Sports Coach, Music Teacher, etc.)*

Name of Applicant: \_\_\_\_\_  
Surname First Name Middle Name

Name of Reference: \_\_\_\_\_  
Surname First Name Middle Name

Occupation of Reference: \_\_\_\_\_

Address of Reference: \_\_\_\_\_

Phone Number of Reference: \_\_\_\_\_

Please comment briefly about the applicant in reference to each of the subjects listed below:

1. Activities (School, Community, 4H)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Character  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Abilities  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Other Pertinent Information  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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