



CO-OPERATORS STUDENT BURSARY APPLICATION FORM

Personal Information

Name:

Full Mailing Address:

Phone: (home)

(cell):

Email address:

Pronouns for NBASW communications:

NBASW Information

NBASW membership #:

Year you became an NBASW member (e.g. 2025) :

Member Category: social work student member social work technician student member
 social work technician member social work member

Academic Information

Please provide the following information. If more space is required, please list on a separate sheet and attached to this application.

Educational institution in which you are currently enrolled as a **full-time student** in a social work or recognized social work technician program: *(please select one)*

Mi'kmaq and Wolastoqey BSW Program at St. Thomas University
Université de Moncton (BSW or MSW)
St. Thomas University (BSW or MSW)
University of New Brunswick-Saint John
New Brunswick Community College
Collège Communautaire du Nouveau-Brunswick

Level (<i>select one</i>)	Institution Location / Campus	Anticipated Graduation Year
Diploma		
Bachelor		
Master		



Short Essays

The Selection Committee will review your application based on the following questions:

Please type your answers, there is a maximum 400 words for each question.

- 1) Why did you choose to pursue your studies to become a social worker or social work technician? What is your vision?



2) Describe what you consider to be your most significant community involvement to date.

I certify that all of the information included in this application is accurate and true. I understand my application will not be considered if any false information is included.

Signature

Date