

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

**Personal Information** 

Université de Moncton St. Thomas University

University of New Brunswick Saint John New Brunswick Community College

Collège Communautaire du Nouveau-Brunswick

Name: Full Mailing Address: Phone: (home) Email address:	(cell):	
NBASW Information		
NBASW student membership #: How long have you been a studer	t member with the NBASW? :	
Academic Information		
Please provide the following inforsheet and attached to this applica	mation. If more space is required, please list on a separate tion.	
Educational institution in which y or recognized social work technic	ou are currently enrolled as a full-time student in a social wo an program: (please select one)	rk
Mi'kmaq/Maliseet BSW Progr	am	

Level (select one)	Institution Location / Campus	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 mos	st 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.		
	understand my application will not be cons	nucleu il any laise illioriffation is iliciuded.	
Signatu	ure	Date	

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