



Program Bursary Application Form 2017 Science ALIVE

Science Education since 1994

Participant Information

Last Name:	First Name:
Birthday:	Gender:
Address:	
City:	Postal Code:
Home Phone:	Program Name(s):

Parent/Guardian Information

Last Name:
First Name:
Address (if different from above):
Relationship to Child:
Email Address:

Financial Information

Amount Applying For: Full [] Partial []
Household Income from 2016 Tax Return:
Number of People Living in Household: Adults [] Children []

Please have the student write a one page letter, addressed to Science Alive, explaining why they would like to attend Science ALIVE camp.

Please email or mail this form and the letter to Science ALIVE as soon as possible. Applications must be received **at least one week prior to the start of camp.**

Mailing Address:

Science ALIVE
C/O Faculty of Applied Sciences
Simon Fraser University
8888 University Drive
Burnaby, B.C.
V5A 1S6

I, undersigned, declare that the information included in this application is accurate and complete to the best of my knowledge. I understand that should the participant's bursary be funded by a company/individual, they may be asked to write a letter of appreciation.

Signature of Parent/Guardian

Date