



Municipality of Yarmouth Leaders of Tomorrow Bursary Application

Full Name: _____

Address: _____

Name of parents / guardians: _____

*Municipality of Yarmouth Assessment Account Number: _____

Phone #: _____ Name of Program: _____

Name of trade school / community college / university you plan to attend:

Attachments:

- 150 word essay describing how this bursary will impact your access to post-secondary education.
- Resume
- Transcript including first semester, grade 12 marks.

Please return your completed application form by April 30th to:

Municipality of Yarmouth
932 Highway 1, Hebron, NS B5A 5Z5

*If the student does not live within the Municipality of Yarmouth but a parent is a residential rate payer for a property within the Municipality of Yarmouth, please provide the Assessment Account Number from the tax bill for that property.