



Knowles CENTRE

Arthur E. Prior Scholarship
2065 Henderson Highway
Winnipeg, MB R2G 1P7
T: (204) 339-1951 F: (204) 334-4173

Arthur E. Prior Scholarship Application Form

1. Applicant Information

Name: _____
(last name) (first name)

Address: _____
(street address or box number)

_____ (city, province, postal code)

_____ (telephone) (email)

2. School/Program Information

School you wish to attend: _____

Address: _____
(street address)

_____ (city, province, postal code)

Contact person: _____

_____ (telephone) (email)

Program or area of study: _____

Length of program: _____ Start date: _____

Why do you want to take program: _____

Have you already been accepted into program? Yes No

Will you attend if you don't receive scholarship? Yes No

Have you applied for funding elsewhere? Yes No
(i.e. Student Social Assistance, federal or provincial training programs)

If yes, where? _____

Note: If you are receiving Social Assistance, you are required to report additional income.

3. References

Please list two references we may contact:

Name: _____

Name: _____

Address: _____

Address: _____

Home phone: _____

Home phone: _____

Work phone: _____

Work phone: _____

Email: _____

Email: _____

4. Program Cost Information

Please indicate the expenses for the full length of the program, e.g., Transportation - \$22/month x 10 months = \$220)

Tuition \$ _____

Lab Fees \$ _____

Tools and supplies \$ _____

Books \$ _____

Student fees \$ _____

Transportation \$ _____

Special clothing or equipment (e.g. boots, uniforms) \$ _____

Other \$ _____

Other \$ _____

Other \$ _____

Total cost of program: \$ _____

Total amount requested: \$ _____

5. Scholarship Recognition

Do you permit Knowles Centre to print your full name in its annual report and/or newsletter, identifying you as a recipient of the Arthur E. Prior Scholarship. By giving this permission, you acknowledge and understand that others will learn that you received services from Knowles Centre. Moreover, you understand that you are under no obligation to consent and no consequence will result by refusing to consent to give permission for this release of information.

- Yes, I give permission for Knowles Centre to print my name in the annual report or newsletter.
- No, I do not give permission. Please do not print my name.

Signature _____

Date _____

If you have any questions regarding the Arthur E. Prior Scholarship, please call Knowles Centre at (204) 339-1951 or email info@knowlescentre.ca. We look forward to being of help.

Revised: April 2011