

RRC Dependents Award Application Form

Personal Information

Name of College **program** for which you have been accepted/registered: _____

Student Number: _____ Social Insurance Number: _____

Last name: _____ First name: _____

Date of Birth: _____

Current Address: _____

City: _____ Province: _____ Postal Code: _____

Permanent address (if different than above): _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Educational Background

Name of High School: _____

Grade completed: _____ Year: _____

Letter of Application

Attach a one page letter containing the following:

1. Why have you chosen Red River College for your post-secondary education?
2. Why have you chosen your program?
3. What are your short and long term career goals?

This section is to be completed by the RRC staff member who is also a MGEU member:

Last name: _____ First name: _____

Work phone number: _____ Work address: _____

Years employed at RRC: _____

Dependent Relationship (please initial beside the definition that applies)

An unmarried and financially dependent natural, adopted or step child or any other unmarried financially dependent child for whom you or your spouse has been appointed guardian and who is less than 25 years of age:

Or

A spouse or common-law partner who is not engaged in full time employment and dependent on you for financial support:

I certify that the information given on this application form is complete and true in every respect. I understand that as an award applicant/recipient, the information on this application may be provided to the Award Selection Committee/Donor.

Signature of Applicant _____ Date _____

Signature of Parent/Guardian/Spouse _____ Date _____