

**CARLETON/ NORTH YORK BRANCH
NB SOCIETY OF RETIRED TEACHERS
SCHOLARSHIP**

OFFICIAL APPLICATION

Full Name of Applicant: _____

Mailing Address: _____

Home Telephone Number: _____

Contact e-mail Address: _____

High School Attending: _____

Post Secondary Institution Planning to Attend: _____

Program/Faculty of Study: _____

Value of Scholarships/Bursaries Awarded to you to date: _____

REQUIRED ATTACHMENTS TO THIS APPLICATION:

- (1) Official **transcript** of marks.
- (2) A **statement** (maximum 2 pages) indicating school and community contributions and why you feel you should be awarded this bursary.
- (3) A **reference letter**.

Each school is asked to select three applications and submit them to the chairperson of the Carleton North/York Branch N.B. Society of Retired Teachers Scholarship Trust Fund Committee on/or before May 08, 2026.

Closing date for successful applicant to complete this award:
December 31 of the year of application.

