

Application Form – BVCF Fritz Pfeiffer Adult Learning Award
Printable PDF Version

Instructions

1. **Download this form and print.**
2. Complete all required information manually.
3. Scan and email to the BVCF OR mail your completed copy. Include your cover letter and two signed reference letters.
4. Keep a copy for your records.

Date: _____

Name: First, Last: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Citizenship: (Canadian, permanent resident, landed immigrant, other): _____

Year of graduation from secondary school: _____

Community and leadership activities, volunteer work: _____

Hobbies and interests: _____

Educational institution that you plan to attend: _____

Name of program. Indicate specialty if known: _____

BVCF may use this information to determine my eligibility for a Learning Award. If successful I will supply my Social Insurance Number. BVCF may publicize my name, town and photo in print and digital media. Agree (yes/no): _____