



**Bursary Award Application Form**

Student's Name: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of your Secondary School: \_\_\_\_\_

School Phone: \_\_\_\_\_

School Address: \_\_\_\_\_

School Graduation Ceremony Date: \_\_\_\_\_

Art Teacher: \_\_\_\_\_

Guidance Teacher: \_\_\_\_\_

Name of Post-Secondary Institute, if attending:

\_\_\_\_\_

Name of Program that you are enrolled in there: (does not have to art related)

\_\_\_\_\_

How many works of art will you be submitting? (Up to five pieces allowed)

\_\_\_\_\_

I consent to Shoreline Artists using my art work and/or name to promote The Shoreline Artists Bursary program. Please place your signature on the line below.

Please read the bursary requirements and conditions carefully as attached.

Mail to: Brenda Elliott, 519 Crawford St. Port Elgin, On N0H2C2 Shoreline

Artists Bursary Award

Email: [brenda519@icloud.com](mailto:brenda519@icloud.com) and [dianwise@gmail.com](mailto:dianwise@gmail.com)