



**ONTARIO MUNICIPAL FIRE PREVENTION
OFFICERS ASSOCIATION**

APPLICATION FOR STUDENT BURSARY - 2005

Please complete the following:

APPLICANTS NAME:	STUDENT #:
_____	_____
EDUCATIONAL FACILITY:	CAMPUS:
_____	_____
COURSE ENROLLED:	

APPLICANTS MAILING ADDRESS:	

CITY	POSTAL CODE:
_____	_____
PH:	FX:
_____	_____

Email Address: _____

Have you previously applied or received the OMFPOA bursary?

OMFPOA
c/o 2352 Arnold Crescent
Burlington, Ontario L7P 4G3

Office Use:

Membership # **For Year:**

Cheque #: _____

OMFPOA SIGNING OFFICER: _____