



CTTAM Financial Scholarship Application Form

(Please print)

Student's Name: _____
Last Name *First Name*

Parent's Name: _____ CTTAM Member No. _____

Program of Study: _____

School where Student is registered: _____

Student is registered full-time: Yes No

Required as part of the application:

The applicant must attach a copy of an official letter from the Educational Agency verifying that the applicant is enrolled as a full-time student in an Engineering Technology or Applied Science program in Canada.

I attest to the best of my knowledge that all the information written above and included within this application is accurate and true.

Applicant Signature: _____ Date: _____

**** Please note that the deadline for applications is September 27, 2019 ****

<i>Date File Received:</i> <i>(CTTAM office use only)</i>	
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