

<b>Policy Name:</b> Grad Bursary	Effective Date: May 26, 2026
<b>Policy Number:</b> FA-09	Approval Date: 26 May2026
Policy Area: Finance and Administration	Council Resolution No.: 155/2026
Policy Section: Finance/ Administration	Replaces Policy: NEW
No. of Pages: 3	

## STATEMENT

This guideline applies to the yearly graduates living in the Municipality of Brenda-Waskada and/or completing grade twelve in the Municipality of Brenda-Waskada.

Each year, the municipality provides a bursary to graduating students residing in and/or completing grade twelve within the municipality.

## PURPOSE

The purpose of the policy is to clarify graduates who qualify for the bursary, resulting in consistency and fairness for all.

## POLICY

Graduates who reside and/or complete their schooling within the municipality will qualify for the bursary.

### **Criteria:**

1. Graduates must either live within the municipality and/or complete their schooling within the municipality.
2. The policy, along with grant applications will be forwarded to Waskada School, as well as neighboring municipalities schools prior to graduation.
3. Graduates who are interested are requested to apply to the Municipality of Brenda-Waskada with the application form (Appendix A).
4. Upon receipt of the application forms, the municipality will review the forms to determine if they qualify and select successful graduate(s).
5. Qualifying candidates will be forwarded to the next council meeting for final approval.
6. School(s) will be contacted to advise of the successful candidate(s).



Schedule "A" Bursary Application Form

DUE DATE: April 30<sup>th</sup> Yearly

Name of Graduate: \_\_\_\_\_ Date: \_\_\_\_\_

Physical Address of Graduate: \_\_\_\_\_  
(Street address or Section/Township/Range)

\_\_\_\_\_  
City/Town Province Postal Code

School: \_\_\_\_\_ School Contact Person: \_\_\_\_\_

School Contact Number: \_\_\_\_\_

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

What have you contributed in any of these areas? Please explain how.

- Community Involvement     Volunteering     Integrity
- Unrecognized     Other

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Please tell us about your career aspirations:

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\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature