

## **ACTRA Alberta Scholarship Application (Member)**

General Information:				
Member Name:		ACTRA ID:		
Address:		City:	Prov:	Postal code:
Institution/School Informat	ion:			
Name of Institution		Name of Course (Course of study)		
Address of Institution		City:	Prov:	Postal code:
Course Dates:				
Costs:				
Tuition Fees	\$			
Travel expenses \$				
Lodging \$				
Amount of other fin  Supporting Information Che	tion of the course of st	e receiving \$	<b>)</b> :	
<ul> <li>□ Proof of acceptance in the course</li> <li>□ Tuition cost</li> <li>□ Statement of any other financial support being provided for this course of study</li> <li>□ Essay or Video</li> </ul>				
If applying for travel and loc	lging:			
<ul> <li>□ The location of the study program is required</li> <li>□ Full details of costing including travel and lodging</li> </ul>				