## The University of Winnipeg Professional, Applied and Continuing Education GWEN AXWORTHY BUSARY APPLICATION FORM

Last Name	First Name	Middle Name	
Email Address		Telephone	
Mailing Address	City	Province	Postal Code
Please Note			
be awarded annu	ally to a student who has c	completed at least one	other's birthday, this bursary will course in the 55 Plus Program of anal courses in that program.
November 30 for		application for fundi	31 for the fall session and ng will be considered in the order ing Education office.
and authorize the disclo	osure to the Awards & Fina	ncial Aid Office at The	ncial assistance. I hereby consent University of Winnipeg any n determining my eligibility for
Signature		Da	nte