



**Glance Bay Central**  
CREDIT UNION

## APPLICATION FOR SCHOLARSHIPS

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

ACCOUNT # AT CREDIT UNION \_\_\_\_\_

OR

NAME AND # OF PARENTS OR GUARDIAN \_\_\_\_\_

SCHOOL PRESENTLY ATTENDING \_\_\_\_\_

SCHOOL ATTENDING IN SEPTEMBER \_\_\_\_\_

**PLEASE INCLUDE A TRANSCRIPT OF YOUR RECENT MARKS.**

**Main Branch** 598 Main  
Street Glance Bay, NS  
B1A 4X8

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Fax (902)-842- 9201