



**FISHING  
LAKE METIS  
SETTLEMENT**

**FLMS WHERE ALL ARE  
PROSPEROUS, HEALTHY, AND  
ENJOY A GOOD QUALITY OF LIFE.**

## **William Desjarlais Memorial Bursary**

CONTINUING STUDENT – APPLICATION DEADLINE: APRIL 1, 2026

### **Application Information**

Full name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street address Apt./Unit #

\_\_\_\_\_ Email: \_\_\_\_\_  
City Prov. Postal Code

Are you a residing member of the Fishing Lake Metis Settlement? Yes  No  Confirmed: \_\_\_\_\_ Date: \_\_\_\_\_

If no, are you on an authorized leave of absence for educational purposes? Yes  No  Confirmed: \_\_\_\_\_ Date: \_\_\_\_\_

Are you a first-time applicant of the William Desjarlais Memorial Bursary? Yes  No  If no, when? \_\_\_\_\_

Were you in school full time in 2025-2026 Yes  No  If yes, explain? \_\_\_\_\_

### **Education**

High school: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

University: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

## Letter of Support

Please identify:

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

### Attachments required:

1. Personal Statement
2. Most recent school marks
3. Statement of Financial Need (Please identify all sources of training income?)
4. Summary of Volunteer/Community Service & Extracurricular
5. Letter of Support

### Have you applied for or received other Bursaries for the 2026-2027 school year? Please Identify:

Name of Bursary/Scholarship	Amount applied for?
_____	_____
Conditions: _____	Date: _____
Contact information: _____	_____

### Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____	Date: _____
------------------	-------------