

Municipalities Newfoundland and Labrador Awards

Municipalities Newfoundland and Labrador, the acknowledged spokesperson for municipal government agreements within the province and a strong supporter of education and training, is pleased to sponsor a scholarship and a bursary each valued at \$500.

Municipalities Newfoundland and Labrador Scholarship

Donor: Municipalities Newfoundland and Labrador

Number of Awards: One

Value: \$500

Criteria:

- This scholarship is limited to the sons, daughters, or wards of municipal elected officials (Mayors, Deputy Mayors, Councilors) or Municipal Staff.
- Awarded to full time student in any regular program.
- Preference will be given to enrolled in the second year or greater.
- If there are no eligible applications from students in their second year or greater, students in their first year who are either sons, daughters, or wards of municipal elected officials, may be considered.
- Based on academic merit.

Required Documents:

- Application Form
- Student Progress Report for Industrial Trade Students (for courses that are still in progress and not on college transcript)

Deadline: Mid-January

Application on next page.



Application must be received by Student Services office by January 19, 2026

Applicant Checklist:

☐ A College Reference form is attached

Name: _____Student #: _____

Address: _____College E-mail: _____

City: _____Prov: _____Postal Code: _____

Program: _____Campus: _____

Year of Program: 1st ☐ 2nd ☐ 3rd ☐ 4th ☐Phone #: _____

Number of Awards: One
Value: \$500
Criteria:

- This bursary is limited to the sons, daughters, or wards of municipal elected officials (Mayors, Deputy Mayors, Councilors) or Municipal Staff.
- Awarded to full time student in any regular program.
- Preference will be given to enrolled in the second year or greater.
- If there are no eligible applications from students in their second year or greater, students in their first year who are either sons, daughters, or wards of municipal elected officials, may be considered.
- Based on academic merit.

Are you a child/ward of a municipal elected official or employee in Newfoundland and Labrador?

Name of the official: _____Relationship: _____

Municipality: _____Municipal Position: _____

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

I hereby make the following declaration:

1. I intend to be a full-time student for the academic year/semester for which this application is made.
2. I have answered all questions, which are applicable to me, and the answers given by me are true.
3. I understand that if selected for an award / scholarship/ bursary I will be required to provide my Social Insurance Number, so that a T4A may be issued for income tax purposes.

Permission is hereby granted for the Awards Committee to obtain any further information required from appropriate individuals or agencies.

I further acknowledge that my personal information (i.e. photo, video, name, program and home community) may be shared with the donor of this award and can be used by CNA for promotional purposes.

College of the North Atlantic is an educational body of the Government of Newfoundland and Labrador and is therefore subject to the Access to Information and Protection of Privacy Act, 2015 (ATIPPA). The college's Student Services Department and CNA Foundation Office are collecting your personal information to process the scholarship application. The personal information you provide may be disclosed to the donor. This personal information is collected under the authority of the College Act 1996 (SNL1995, Chapter C-22.1). Collected personal information will be stored in accordance with our normal network and information security measures. For further information about the collection and use of this information please contact the Provincial Awards Chairperson at 709-643-7880, 432 Massachusetts Dr. P.O. Box 5400 Stephenville, NL A2N 2Z6. For more information about the ATIPPA please visit www.cna.nl.ca/about/atippa.asp.

I have read and understand the Privacy Statement above and consent to the collection and use of this personal information.

Name: Print or Sign

Date





Student Name: _____ Student ID: _____

To be completed by the Mayor, Clerk or Manager of the Municipality:
(PLEASE PRINT)

I certify that the above student is a child or ward of _____, an
elected official or employee in the Municipality of _____, NL.

CERTIFIED BY:

NAME: _____

TITLE: _____

CONTACT NUMBER: _____

CONTACT E-MAIL: _____

SEAL