



THE BC REGIMENT (DCO) ASSOCIATION CHARITABLE TRUST

BURSARY APPLICATION

Full Name:	
Address:	Telephone:
	E-mail:
Rank:	
Regimental Number:	
Name of Institution:	
Student Number:	
Course of Studies (faculty):	
Year of Studies:	
Remaining years of Study:	
Full Time / Part Time (study):	
Length of Regimental Service:	
Future Plans in the Regiment:	
Financial Circumstances [reason(s) financial assistance required]	
Comments:	

APPLICANT TO DELIVER COMPLETED FORM TO: BCR ORDERLY ROOM

Signature of Applicant

Regimental Affairs Committee – Comments/Recommendations: _____

