Northern Spirit ATA Local #6 Teacher Bursary Application

A. Vital Statistics (please print) Name: Surname Full Given Names Present Address: Telephone Number: Home Address: (if different from above) Years of University Training as per last T.Q.S. Evaluation: _____ Monetary Assitance from: a) School Board No ___ Yes __ Amount: _____ b) PD Committee No ___ Yes __ Amount: _____ **B.** Teaching Record School teaching at this year: Number of years in this ATA Local: _____ Total number of years teaching experience at the end of this year: Teaching specialty or area: C. University Plans University or College at which you plan to register:

Registering for:	
Degree Program:	
Post-Baccalaureate:	
Other:	
Where do you plan to live, while attending	g University or College?
Plans for returning to teaching in this area	:
D. ATA Involvement	
List your participation in this ATA Local.	
Date	Signature
Date	Signature