



Queensland  
Country Women's Association

# Condamine Valley/ Warwick Branch Bursary Application Form

Personal Contact Details			
Full Name			
Phone		Mobile	
Address			
Email		Date of Birth	
Parents Contact Details			
Full Names			
Address			
Phone			
Email			
Education Details			
Secondary Education			
Tertiary Education (If Any)			
Present Course of Study (Name Of Institution And Details Of Course)			
<p><b>With this application, please include:</b></p> <ul style="list-style-type: none"> <li>• Written proof of achievement</li> <li>• Demonstrate the need for financial support</li> <li>• Three written, current (dated) character references</li> <li>• Details of continuing support</li> <li>• Short (500 words) resume of applicant's achievements and future aspirations</li> </ul> <p>Please ensure that ALL the above documentation is provided otherwise we cannot assess your application.</p>			
<p><b>Please send your application to:</b></p> <p>The Secretary QCWA Condamine Valley/Warwick Branch 76 Grafton Street WARWICK QLD 4370 Please mark envelope "Confidential – Bursary Application"</p> <p style="text-align: right;">P 0408 767 558 E <a href="mailto:ipcw7@bigpond.com">ipcw7@bigpond.com</a></p>			
<b>Applications Close 19 January</b>			