

Submit to: Financial Aid Office Justice Institute of British Columbia 715 McBride Boulevard New Westminster BC V3L 5T4

Email: <u>financialaid@jibc.ca</u> Confidential fax: 604.528.5653

## Bernie Magnan Award

Personal Information	
First Name	Last Name
Gender □ M □ F □ T	D.O.B
Apt/Unit/PO Box	
Address	
City	Postal Code
Phone #1	Phone #2
Email	
JIBC Student #	Social Insurance #
Citizenshin Status:	

## 

Academic Information

## Personal Profile

Please describe how receiving this award will help you achieve your educational goals. <i>Note: If there is any information that you feel was not reflected in this application, please include it in this section. (Please attach additional pages if required).</i>		



## Please provide the name and telephone number of the person who will be providing a letter of reference. This individual should be qualified to speak about your community involvement. Provide the reference form to your referee in sufficient time for them to return it by the deadline. Your reference could be a teacher, principal, coach or supervisor but not a family

Letter of Reference

member.

Name:	Phone number:	
Title or relationship to stud		