

201-3833 Henning Drive Burnaby, BC V5C 6N5 eocp@eocp.ca www.eocp.ca

T 604.874.4784 F 604.874.4794 Toll Free 1.866.552.EOCP

## **EOCP 2023 BRIAN THORBURN STUDENT SCHOLARSHIP APPLICANT INFORMATION** Name: Phone: Date of birth: Email: Current address: City: Province/Territory: Postal Code: **EDUCATION INFORMATION** Current university/college: Address: City: Province/Territory: Postal Code: **ACADEMIC RECORD** Program of Study: Length of Program: End Date of Program: Level of Study: Course Load (%): Cumulative GPA: **CAREER GOALS COMMUNITY INVOLVEMENT**

EXTRACURRICULAR INVOLVEMENT			
ETNANCIAL INFORMATION			
FINANCIAL INFORMATION			
<b>Description</b> Work Income		M	Ionthly Revenues
Family Support			
Scholarships/Bursaries			
Student Loans			
GST Credit			
Total Revenues			
Description		Monthly Expenses	
Books and Supplies			
Rent/Mortgage			
Utilities			
Phone			
Food			
Entertainment Clothing			
Gas/Transportation			
Vehicle Insurance			
Medical/Dental			
Credit Card Payments			
Other Debt Payments			
Total Expenses			
Net Income (Revenues – Expenses)			
REFERENCES			
Name		Email	Phone
VERIFICATION SIGNATURE			
I verify that the information provided on this application is true.			
Signature of applicant:			Date:

\*For students enrolled in a Certificate or Diploma program only. Submit on or before 15 August 2023 to eocp@eocp.ca