



SCEPA Bursary Application Form

Submit to:
Jacob D. Hillier
14 Court Street
Suite 200, Box 182
Truro, NS, B2N 3H7

Name of Applicant _____

Address _____

Institution* _____ Position _____

Purpose of the Funding _____

Date of the Activity/Course _____

Prior Educational Courses in Emergency Preparedness(Educational Bursary Only)

Total Cost _____ Amount Requested From SCEPA _____

Approved _____ Not Approved _____

Approved Contingent Upon _____

Date _____

*If applying on behalf of a SCEPA Regional Committee Indicate your region here.