



Mario Gasparotto Visual Arts Bursary Application Form



Applicant's Full Name: _____
First Middle Last

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Date of Birth: _____ / _____ / _____
Year Month Day

Email address: _____

Secondary School Attending: _____

Secondary School Graduation Date: _____

Registered Post-Secondary Institution: _____

Program of Studies: _____

Name of Visual Arts Dept. Head Signature

Permission is granted to publish the name and photo of recipient on print and electronic media, including both internal and external publications and sites.

Signature of Applicant Date:

Signature of Parent/Guardian (student under 18 years of age) Date:

In addition to this completed form, please include the following:

- ❖ A letter of application from the student, explaining post-secondary plans and emphasizing how these funds will be of benefit to the student
- ❖ Evidence of acceptance into a post-secondary visual arts program
- ❖ A letter of recommendation from the student's teacher detailing the student's achievement and work habits in visual arts as well as school and community involvement

For the Oral Presentation, please have available:

- ❖ A portfolio of least five original major works that reflect the student's best skills and any sketch books that the student may have.
- ❖ Bring 3 – 5 pieces of original work that demonstrates a variety of art techniques

Only completed applications will be considered for this bursary. In order to be considered for this bursary a completed application package must be forwarded by the School Visual Arts Department Head to Executive Director, The Angel Foundation for Learning by:

Monday, May 13, 2013

Late Applications will not be considered.