

What is the *CRA charitable registration number* for this organization? _____

If you are applying for a bursary as an **Entrepreneur**,

(i) What *percentage of this business* do you own? _____

(ii) How *long have you owned* your business _____

(iii) Are you *responsible for business development*? _____

It is important that the Leacross Foundation understand your motivation for applying to the MCW and for one of their bursaries, please attach a separate document explaining:

What some of the qualitative reasons for taking this program are?

What learning outcomes are you expecting from attending this program?

What some of the barriers are that have kept you from obtaining further education or management training before?

Should I be awarded a bursary, these funds will be applied to my tuition fee only.

Application Date: _____ Signature: _____

Bursary Award Recipients - your personal consent is required to:

Release the following personal information to the bursary's donor

- Name/address
- Telephone number/e-mail address
- Brief description of your circumstances
- Photograph (to be taken/released)

Date

Consent Signature

Submit completed application to:

Attention: AEmilia Jarvis

The Centre for Research and Education on Women and Work (CREWW)

Sprott School of Business, Carleton University

323 Dunton Tower,

1125 Colonel By Drive, Ottawa, ON K1S 5B6.