The Royal Canadian Legion Branch 24

Scholarship Application

800 Cranbrook street
Cranbrook, BC
V1C 3R9
Ph. 426 8531

Student Name_____

Address _____

_____

_____

Please state relationship(s) to Legion Members(s) below:

Name of Legion Member And Relationship	Branch Name and Number	Membership Years	Type of Membership

Number of Children in Family:_____

Approximate Gross Family Income: _____

Signature of Student:_____

(Please attach a copy of school transcripts)