



THQ Children & Youth Department
 2 Overlea Blvd
 Toronto ON M4H 1P4
 (fax) 416 422-6121



ELLIOTT BURSARY

It is understood that in order to meet the terms of the Fund, I must be:

- a Salvationist in good standing,
- and, by the wish of the benefactor, a **member and an attendant** of meetings of the Student Christian Movement or Inter-Varsity Christian Fellowship, or The Salvation Army Students' Fellowship.

 (Name of Applicant)

 (Signature of Applicant)

 (University or College)

 (Faculty & Year)

 (Postal Address)

 (Corps now Attending)

I hereby make application for a grant from the Elliott Fund to assist in meeting my University expenses.

I am a participating member of the Christian Fellowship Group on my campus.

YES NO Name of group: _____

RECOMMENDATION - by chaplain or CO

 (Signature of CO)

 (Signature of SA/group chaplain)

 (Signature of DYS)

 (Signature of DC)