

**SIR WILFRED LAURIER MEMORIAL SCHOLARSHIP
APPLICATION FORM**

Name: _____ Student Number: _____

Telephone number (in Kingston): _____

E-mail: _____ Faculty: _____

Concentration: _____ Year: _____

When do you expect to graduate? _____

Place of birth: _____

Do you come from a French-speaking family? _____

Did your family speak French at home? _____

Are you Canadian (by birth or naturalization)? _____

Schools attended with approximate dates: _____

Places where you have lived with approximate dates: _____

How many years have you studied French? _____

NOTE: Completed Applications must be returned to the Department of French
Studies prior to: **February 15**