

Gunn's Hill LP

Prowind Inc. 201-F 12 James St. N Hamilton, ON L8R 2J9 Canada Phone: 905 538 1747 Fax: 866 203 6516 contact@prowind.com www.prowind.com

Application Form for the Gunn's Hill Wind Farm Renewable Energy Educational Bursary for Members of the Six Nations of the Grand River

The Gunn's Hill Wind Farm Renewable Energy Educational Bursary for Members of the Six Nations of the Grand River was created through the development of the Gunn's Hill Wind Farm, which was constructed and is operated by a joint partnership between Prowind Inc., the Six Nations of the Grand River Development Corporation, and the Oxford Community Energy Co-operative.

Please attach this completed form to the required documentation for consideration for the Gunn's Hill Wind Farm Renewable Energy Educational Bursary for Members of the Six Nations of the Grand River. A completed application package should be submitted by email, fax or mail to the address listed below:

Attention: Carr Villabroza Prowind Inc. 201-F 12 James St. N Hamilton, ON L8R 2J9 Phone: 905-528-1747 Fax: 866-203-6516

E-mail: cvillabroza@prowind.com
Website: www.prowind.com

Application Criteria:

- 1) Member of the Six Nations of the Grand River (submit proof of affiliation)
- 2) Registered in post-secondary education or job training that is related to renewable energy or related field (submit program details and proof of registration).
- 3) Completed Application Form
- 4) Submit a short essay (1-2 pages) explaining how your education or training can be applied to the renewable energy industry and how this bursary will be applied to that education, including a brief summary of the costs to be covered by this bursary.



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Personal Information	
Legal Name in Full	
Home Address	
City	
Postal Code	
<i>E-mail</i>	
Phone Number	
Note: Notification of bursary award wil appropriate addresses above to accom	l be sent via email and bursary cheque will be sent via mail. Please include the modate this.
Self-Declaration of Indige *Indigenous Status encompasses those	nous Status* (circle one): YES NO with First Nations, Métis, and/or Inuit backgrounds.
Academic Informa	tion
Program/Job Trail Enrolle	
Institution/Empl	oyer
Length of Program/Trail	ning
Length of Program/Trail Comple	3



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Applicant's Required Declaration

true and complete to the	brmation included in this Application Package is best of my knowledge and I understand that uded be incomplete or inaccurate, bursary funds withdrawn.
Applicant's Signature	Date
Applicant's Optional Declarat	ion
academic program or job tra	agree that my name and information about my aining may be included in promotional materials at out in association with this bursary, including de available to the public.
Applicant's Signature	 Date





