

**APPLICATION**  
**SOCIETY CFA® SCHOLARSHIP PROGRAM – June 2009 Exam**  
**Application Deadline: January 2, 2009**

The CFA Institute (CFA®) and CFA Vancouver are offering scholarships for the Chartered Financial Analyst® (CFA®) Program. CFA Institute will waive the registration fee and all but US\$220 of the enrollment fee for these scholarships and CFA Vancouver will reimburse the US\$220 enrollment fee for these scholarships. Candidates will be responsible for the cost of study books and materials.

Society scholars must fulfill all CFA candidate requirements to register. If society scholars are undergraduate students, they must be in the final year of their degree program and attend a college or university within 200 miles of the society.

**Complete the following (please type or print legibly):**

Exam Date: June 2009 Enrollment Level : \_\_\_\_\_  
Candidate No. \_\_\_\_\_ Social Insurance No . \_\_\_\_\_  
Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Have you registered for the CFA exam? [ ] Yes [ ] No  
Are you a member of a CFA Institute Society or Chapter? [ ] Yes [ ] No  
If yes, give name: \_\_\_\_\_  
Are you employed? [ ] Part-time [ ] Full-time Name of employer: \_\_\_\_\_  
Address of employer: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
May we contact your supervisor? [ ] Yes [ ] No  
If yes, name of supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Are you a student? [ ] Part-time [ ] Full-time Level of school completed: \_\_\_\_\_  
Name of undergraduate college or university: \_\_\_\_\_  
Name of graduate college or university: \_\_\_\_\_  
Highest degree held: \_\_\_\_\_  
If no degree is held, when do you expect to receive your degree? \_\_\_\_\_  
Current field of study: \_\_\_\_\_  
Name of Professor: \_\_\_\_\_ Phone: \_\_\_\_\_

*Please complete the following questions*

**Why do you want to achieve the CFA® Charter?**

---

---

---

---

**Briefly describe your involvement in activities and organizations:**

---

---

---

---

**Briefly describe your financial need for this scholarship:**

---

---

---

---

**I heard about this scholarship from:**

---

---

---

---

(Date) \_\_\_\_\_ (Signature) \_\_\_\_\_

**Please return this application to:**

*CFA Vancouver  
Attn: Daren Atkinson, CFA  
PO Box 76007  
Vancouver, BC V6E 4T2  
Fax: 1-800-708-1774  
Email: [education@cfavancouver.com](mailto:education@cfavancouver.com)*