



Emergency Response Assistance Canada
Assistance d'intervention d'urgence du Canada
2700, 715 – 5th Ave S.W. Calgary, Alberta T2P 2X6
Telephone: 587-349-5880 Fax: 403-543-6099 Web: www.erac.org

ERAC Leo Sichewski Memorial Bursary Fund – Application Form

Please also provide:

- Copy of your driver's license or birth certificate and photo I.D.
- Proof of acceptance or current enrollment (e.g., transcripts, course registration, etc.) and invoice for courses or semester.
- Resume/CV.

Email all required documents to bursary@erac.org by March 31, 2025.

Full name: _____

Address: _____

City, province: _____ Postal code: _____

Phone: _____ Email: _____

Relationship to ERAC (e.g., RMA/TA, responder, Plan Participant member, etc.):

Educational institute: _____

Program: _____ Years attended: _____

Official description and duration of the eligible program:



Emergency Response Assistance Canada
Assistance d'intervention d'urgence du Canada
2700, 715 – 5th Ave S.W. Calgary, Alberta T2P 2X6
Telephone: 587-349-5880 Fax: 403-543-6099 Web: www.erac.org

ERAC Leo Sichewski Memorial Bursary Fund – Application Form, cont.

A short essay (maximum 500 words) on "Why I would like to pursue a career in safety or emergency management, and why I would be or am suited for such a career."