



GDAS Inc

1984 - 2009

25th Anniversary
25th Anniversary

LLOYD GLASS APPRENTICESHIP BURSARY APPLICATION

PERSONAL INFORMATION

Applicant's Surname _____ First Name _____ Middle Initial _____

Address _____

City _____ Province _____ Postal Code _____

Telephone _____ Date of Birth _____

Marital Status _____ # of Dependants _____

EDUCATION HISTORY

High School Attended _____ Level Completed _____

Post Secondary Attended _____ Level Completed _____

EMPLOYMENT INFORMATION

Current Employer _____

Address _____

City _____ Province _____ Postal Code _____

Supervisor _____ Telephone _____

Number of years at present employer _____

Number of years employed in the glass industry _____

A brief outline as to the reasons you chose the glass industry _____

Are you currently enrolled in the Saskatchewan Apprenticeship program _____ if yes what level _____

Signature of Applicant _____

Signature of Employer _____

Forward Application to:

GDAS Inc
118 Wakaw Crescent
Saskatoon, SK. S7J 4E2
Fax: 306-477-1507

DEADLINE: APRIL 15, 2009

"WORKING FOR A STRONGER GLASS INDUSTRY"