



District 7010

Rotary Club of Gravenhurst

Service Above Self - He Profits Most Who Serves Best
Box 888 • Gravenhurst • Ontario • Canada • P1P 1V2

ROTARY BURSARY ENDOWMENT FUND

APPLICATION FORM

Eligibility: To qualify for a bursary the applicant must:

- a) be a resident of Gravenhurst or attending school in Gravenhurst.
- b) be planning a post secondary education at a University or College
or,
be upgrading or developing new skills in a program leading to a certificate.
- c) show a financial need.

Applications must be received before **June 30th 2020** to receive funding after September 1st 2020.

All sections of this application form must be completed.

Personal Data:

Name: Given: _____ Last: _____

Address: _____
Postal Code: ____ - ____

Mailing Address (if different): _____

Phone: ____ - ____ - _____ Email: _____

Social Insurance Number: ____ - ____ - _____

Citizenship: Canadian Yes - No. Other: _____

Married: Yes No. Children: Yes No. Ages: _____

I have been attending school in Gravenhurst for _____ years.

I have been living in Gravenhurst for _____ years.

High School: _____ Date of Graduation: _____

Curriculum: (Circle one) Academic Applied Essential Apprentice

or

Present Occupation: _____

I have (acceptance) or (have applied to) the following institutions preferred by me:

- a) _____ Course of Study: _____
- b) _____ Course of Study: _____
- c) _____ Course of Study: _____

Do you have a Student ID # from the institution: Yes No. The ID# is _____.

Fill in this Budget based on the Study Period for this Application

(Ex. A 'study period' may vary. University is typically September to April. Bursaries provided are for one 'study period'.)

Income for Study Period

Total of all savings and investments at the beginning of your Study Period
before paying for any educational costs. \$ _____

Academic Awards, Scholarships, Bursaries expected this year \$ _____

Academic Awards, Scholarships, Bursaries received last year \$ _____

Specify Type or Source: _____

OSAP funding granted for the following amount: Estimate is acceptable \$ _____

Application for OSAP has been made: (Yes) (No) (I am applying.)

Students Net Income from Part Time work during Study Period. \$ _____

Registered Educational Saving Plan available to Student for Study Period \$ _____

Child Tax Credit, _____ per month X _____ months = \$ _____

Parents or Guardian Contributions for your Study Period. \$ _____

Child Support Payments payable to you _____/mo. X _____ months = \$ _____

Rental Income, Alimony, or Sale of Assets. \$ _____

'Total Income' before Other Resources \$ _____

Expenses Anticipated for Study Period

Tuition and Compulsory Fees: \$ _____

Books and Supplies: \$ _____

Accommodation: \$ _____/mo. X _____ months = \$ _____

Food: \$ _____/mo. X _____ months = \$ _____

Utilities: \$ _____/mo. X _____ months = \$ _____

Phone and Internet: \$ _____/mo. X _____ months = \$ _____

Bus Pass, Tickets: \$ _____/mo. X _____ months = \$ _____

Recreation: \$ _____/mo. X _____ months = \$ _____

Clothing: \$ _____/mo. X _____ months = \$ _____

Travel Home: \$ _____/trip. X _____ trips = \$ _____

'Total Expenses' for Study Period = \$ _____

'Total Income' minus 'Total Expenses' = \$ _____

Family Information:

(not required for adults upgrading for technical or trade certificate programs)

Name of Parents: _____ Contact at: _____
_____ Contact at: _____

May we contact your Parents? Yes No.

Address of Parents: _____

Combined Income of Parents before taxes: \$ _____

Income of parent(s) as shown on Line 150 of their Income Tax Return: _____ and _____.

Do your parents own their home: Yes No

How many brothers and sisters in your family? _____

How many are in school. _____. Are siblings at or planning a post secondary institution? Yes No.

Extra Curricular Activities:

Describe any interests, sports, achievements or recognitions you have had.

Briefly explain why you should be considered for this bursary (including financial need):

Questions? Complete the application the best you can. Attach questions or concerns separately.

Consent:

The applicant consents to the indirect collection, use, sharing and disclosure of information herein, for the purpose of verifying the information supplied and information not supplied, as it may pertain to this application for funding. The applicant may withdraw this consent at any time by written notice to the address in the letterhead attached. (All information will be kept confidential.)

The applicant states:

I have given true and accurate information in regard to this application. I realize I am responsible for providing any supporting documentation as may be required. If any information is found, at any time, to be untrue, the Bursary provided will be required to be refunded in full.

Signed by Applicant: _____ Dated: _____

The Parent or Guardian states the information in regard to their finances is Accurate and Complete.

Signed by Parent or Guardian: _____ Dated: _____

Print Name of Parent or Guardian signing: _____