

LOCAL BURSARY APPLICATION

These bursaries are donated by many community organizations, to be distributed to School District 72 students.

- Must be graduating from a SD72 secondary school and planning to attend a post secondary program in the year immediately following graduation unless there are extenuating circumstances.
- Age limit: 19 years by December 31st of the year of application.
- Application must include transcript.

Completed applications must be returned to your school counsellor by the last Friday in April (April 24, 2020)

PERSONAL DATA Surname _____ Given Names _____ Address Birth date **FUTURE EDUCATIONAL PLANS** Name of Institution _____ Location ____ Degree/Diploma to be earned _____ Length of Program____ Have you applied? Yes ___ No ___ If yes, have you been accepted? Yes ___ No____ Career Aspirations _____ Estimated Cost of the First Year of Study: **Tuition Fees** \$ _____ Books and Supplies \$ _____ Cost of Living (\$1,500 per month) \$ _____ Other (specify) \$____ **Total Estimated Cost:**

EMPLOYMENT HISTORY

| Dates of Work | Job | Hours per Week | Hourly Rate |
|----------------------|-----|----------------|--------------------|
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| FINANCIAL INFORMATION: This secti | on to be completed by the student's parents/gua |
|---|--|
| Father's name | Mother's name |
| Employer | |
| Job Title | |
| Parents' anticipated combined gross income f | For 2019/2020: |
| <pre><\$25,000 \$26-\$45,000 \$46-\$70,000 \$71-\$</pre> | 95,000 \$96-\$120,000 \$121-\$150,000 >\$151,000 |
| Siblings: | |
| | Age |
| Name | Age |
| Name | Age |
| | ial and may only be seen by school counsellors a |
| COMPLETE THE FOLLOWING SECTION | ON TO THE BEST OF YOUR KNOWLEDGE |
| Estimated parental contribution to your educa | tion: |
| Student's estimated personal savings as of Jur | ne 30 of your Grade 12 year: |
| Estimated summer job savings: | \$ |
| Scholarships and Bursaries already received: Name (s) | \$ |
| Any other sources of financial aid: | \$ |
| Total Funds Available | e: \$ |
| Approximate value of any motor vehicle(s) y | vou own: \$ |

| CUPE | | |
|---|--|-----------------------|
| IODE Laura Gordon Chapter | | |
| Kinsmen Club of Campbell River Knights of Columbus Ladies Auxiliary to the Eagles | | |
| | | North Island College |
| | | Royal Canadian Legion |
| Royal LePage Advance Realty | | |
| Shaw Communication | | |
| Mosaic Forest Management | | |
| Unifor Local 3019 – Lloyd & Jan McMaster | | |
| Willow Point Lions Club | | |
| Willow Point Volunteer Fire Department | | |
| ncise write up of your involvement in | | |
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Athletics:

| Leadership: | |
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| Environmental Causes: | |
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| I hereby certify that all informa | ation on this application is, to the best of my knowledge, correct. |
| Date: | Signature of Applicant |
| | Signature of Parent/Guardian(s) |
| | |
| I further consent to the release bursary. | of my name for recognition purposes should I be awarded a |
| Date: | Signature of Applicant |
| | Signature of Parent/Guardian(s) |