

Completed applications must be returned to your school counsellor by April 30, 2024.

Awards are sponsored by community organizations for the benefit of SD72 students.

All applications are treated as confidential.

GENERAL

- 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: not older than 19 years by December 31, 2024.
- Application must include school transcript.

APPLICANT INFORMATION

Last name _____ First name _____

Address _____

Phone _____ 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 \$ _____

Estimate cost of living (eg. room and board) \$ _____

Other (specify) _____ \$ _____

Total Estimated Cost: \$ _____

EMPLOYMENT HISTORY

Dates of Work	Job & Employer	Hours per Week	Hourly Rate

COMPLETE THE FOLLOWING SECTION TO THE BEST OF YOUR KNOWLEDGE

Student's estimated personal savings as of June 30 of your Grade 12 year: \$ _____

Estimated summer job savings: \$ _____

Scholarships and Bursaries already received: \$ _____

Name of award(s) received _____

Estimated parental contribution to your education: \$ _____

Any other sources of financial aid: \$ _____

Total Funds Available: \$ _____

Approximate value of any motor vehicle(s) you own: \$ _____

FAMILY FINANCIAL INFORMATION: This section to be completed by the student's parents/guardians.

*This information is treated as confidential and will only be reviewed by school counsellors and administrators for the purposes of determining bursary awards.

Parent/ 1 name _____ Parent 2 name _____

Employer 1 _____ Employer 2 _____

Job title 1 _____ Job title 2 _____

Mark an X in the box that equals your parents' estimated combined gross income for 2023:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<\$25,000	\$26-\$45,000	\$46-\$70,000	\$71-\$95,000	\$96-\$120,000	\$121-\$150,000	>\$151,000

Siblings:

Name _____ Age ____ Name _____ Age ____

Name _____ Age ____ Name _____ Age ____

**Factors which would affect your ability to contribute to your child's education
(e.g. employment history, unusual family expenses, etc.)**

SPONSORING ORGANIZATIONS INCLUDE:

- | | |
|--|--|
| Altrusa Club of Campbell River | Kinsmen Club of Campbell River |
| CR Fraternal Hall Soc., Fraternal Order of Eagles | Knights of Columbus |
| Campbell River Friends of Music scholarship | Ladies Auxiliary to the Eagles |
| Campbell River Hospital Auxiliary | Mid-Island Co-op |
| Campbell River Italian Cultural Society | Mosaic Forest Management |
| Campbell River Volunteer Fire Dept. #1 | Doug Nielsen memorial award |
| CRRTA (Campbell River Retired Teachers' Association) | North Island College Foundation |
| Don & Mavis Larmour vocational award | Royal Canadian Legion Branch 137 |
| Garry and Gretel Griffin bursary | The Truck Loggers Association |
| Global Citizen Award | Vancouver Island Real Estate Board |
| International Program (International Students) | Willow Point Lions Club |
| | Willow Point Volunteer Fire Department |

List any of the organizations, noted above, with which you, your parents or grandparents are affiliated.

Provide a short write up of your involvement in these areas:

Volunteer activities: _____

Work in the community: _____

Athletics: _____

Leadership: _____

Environmental and social justice causes:

I hereby certify that all information 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 of my name and/or picture to School District 72 and the organization donor for recognition purposes should I be awarded a bursary/scholarship.

Date: _____ Signature of Applicant _____

Signature of Parent/Guardian(s) _____