

CONFIDENTIAL

(When completed. Information will not be shared)

BURSARY APPLICATION FORM

This form must be legible – **PLEASE PRINT or fill in on your PC**

Date: _____

GENERAL INFORMATION Social Insurance Number _____

Name: _____
[Surname of applicant] [Given names]

Present Address: _____ Postal Code: _____

Phone: _____ Date of Birth: _____

SERVICE and LEGION MEMBERSHIP INFORMATION

Ex-service member name: _____

Relationship to applicant: _____
[Explain if surname is different from yours]

Military service number: _____

Date of enlistment: _____ Date of release: _____

[A photocopy of service records must be attached]

If you, your parent(s) or grandparent(s) are a member of the Royal Canadian Legion, complete the section below.

Members name: _____ Branch: _____

Members name: _____ Branch: _____

POST SECONDARY INFORMATION

Institution name and complete address: _____

Your course or program: _____

Duration: _____ I am registered in year: _____ Student I.D. # _____

List your extra activities (clubs, sports, music, volunteer work, etc.): _____

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ESTIMATED EXPENSE FOR ACADEMIC/VOCATIONAL YEAR (in Canadian funds)

Tuition fee \$ _____ per school year (Sept-Aug)
Books \$ _____ per school year (Sept-Aug)
Tools/instruments, computer/supplies \$ _____ per school year (Sept-Aug)
Room and board \$ _____ per school year (Sept-Aug)
Transportation \$ _____ per school year (Sept-Aug)
Total expenses \$ _____ per school year (Sept-Aug)

FINANCIAL RESOURCES

Have you applied for OSAP (yes/no) _____ Amount of approved loan \$ _____

If you have been refused assistance from the Ontario Student Assistance Program or you are ineligible to apply, you must provide a letter from OSAP confirming your status.

Students changing course will not be considered for assistance.

Name of Scholarship or Bursary awarded: _____ \$ _____

_____ \$ _____

No. of dependents residing at home _____

No. of dependents in post-secondary schools _____

Combined gross income of parents for the previous year (all sources) \$ _____

Student combined income if married (all sources) \$ _____

Student assets (bonds, securities, cash, etc.) \$ _____

Anticipated budget for academic year Total expenses \$ _____

Total resources \$ _____

Differences between total expenses and total resources (indicate a deficit amount with a -)

DIFFERENCE \$ _____

Signature of applicant _____ Date: _____

Additional information that you feel is important and related to this application may be attached as an additional sheet. Please include your name and address at the top.

Email _____