

KIWANIS CLUB OF WINNIPEG FOUNDATION, INC.

**MANITOBA CITIZENS' BURSARY FUND
FOR ABORIGINAL PEOPLES**

**ANNUAL AWARDS
2012**

**OPEN TO STUDENTS CURRENTLY ENROLLED AT
THE UNIVERSITIES OF BRANDON, MANITOBA, & WINNIPEG**

APPLICATIONS: PICK UP AND RETURN TO:

UNIVERSITY OF MANITOBA

Ms. Bev Getty
Aboriginal Student Centre
University of Manitoba
45 Curry Place
Winnipeg, MB R3T 2N2
Phone: (204) 474-8850
Fax: (204) 275-3142

UNIVERSITY OF WINNIPEG

Ms. Kam Holland
Director of Awards
University of Winnipeg
515 Portage Avenue
Winnipeg, MB R3B 2E9
Phone: (204) 786-9459
Fax: (204) 779-0961

BRANDON UNIVERSITY

Mr. David Rowland
Dean of Students
Student Services
Brandon University
Brandon, MB R7A 6A9
Phone: (204) 727-9653
Fax: (204) 726-4573

APPLICATIONS AVAILABLE FOR PICKUP:

December 9, 2011

DEADLINE FOR RETURN:

February 28, 2012

WINNERS ANNOUNCED:

April 9, 2012

CHEQUES WILL BE RELEASED:

April 13, 2012

CRITERIA:

- Student must of Aboriginal (First Nations, Inuit, Métis) ancestry and demonstrate financial need
- Students must maintain satisfactory grades to retain their eligibility
- Points will be given for extra-curricular/volunteer activities

At present, the Bursary Fund is not designed to help applicants meet the financial cost of entering University. On the contrary, it is designed and subject to the above criteria to help meet financial problems that arise subsequently.

NOTE:

To merit consideration for an award, a copy of the applicant's student history or a transcript should accompany the application (if any courses have been completed by the student to date).

Bursaries range from \$200.00 to \$500.00 each.

RESOURCES FOR CURRENT ACADEMIC YEAR

Note:

To merit consideration, answers must be complete and specific. If more space is required, please use reverse side or provide attachment.

PLEASE PROVIDE INFORMATION REGARDING IF INCOME IS WEEKLY, BIWEEKLY, MONTHLY, ETC.

- 1.) STUDENT LOAN (TOTAL ASSESSMENT RECEIVED FOR YEAR) \$ _____
- 3.) TOTAL AMOUNTS OF BURSARY AWARDS (2011/2012) \$ _____
- 4.) OTHER GOVERNMENT AGENCIES (PER MONTH X 8)
(UIC, CPP, FAMILY ALLOWANCE, DAYCARE SUBSIDY, ETC) \$ _____
- 5.) BAND SPONSORSHIP (PER MONTH X 8) \$ _____
- 6.) UNIVERSITY AWARDS \$ _____
- 7.) EARNINGS DURING ACADEMIC YEAR \$ _____
- 8.) MONETARY GIFTS (FROM PARENTS, PARTNERS, ETC) \$ _____
- 9.) ASSETS (STOCKS, BONDS, RRSPs, etc.) \$ _____
- 10.) OTHER INCOME OR RESOURCE (OF ANY KIND) \$ _____
- TOTAL RESOURCES \$ _____
- GROSS PERSONAL EARNINGS (LAST SUMMER)
(MAY 1 – AUGUST 1) \$ _____
- SPOUSE OR CONTRIBUTING PARTNER'S
GROSS EARNINGS (MAY 1- AUGUST 1) \$ _____

EXPENSES YOU PAY FOR CURRENT ACADEMIC YEAR:

- 1.) TOTAL TUITION (NOT APPLICABLE IF BAND FUNDED) \$ _____
- 2.) BOOKS & SUPPLIES (EXPENSES PAID BY STUDENT) \$ _____
- 3.) RESIDENCE
- A.) ROOM AND BOARD (\$ _____ PER MONTH X 8) \$ _____
- B.) APARTMENT RENT (\$ _____ PER MONTH X 8) \$ _____
- C.) UTILITIES (\$ _____ PER MONTH X 8) \$ _____
- 4.) TRANSPORTATION
- A.) LOCAL TRANSPORTATION (\$ _____ PER MONTH X 8) \$ _____
- B.) CAR EXPENSES (GAS, INSURANCE, MAINTENANCE) ESTIMATE MONTHLY (\$ _____ PER MONTH X 8) \$ _____
- C.) OTHER \$ _____
- 5.) CREDIT CARD AND/OR ACCOUNT PAYMENTS (\$ _____ PER MONTH X 8) \$ _____
- 6.) MEDICAL/DENTAL EXPENSES (\$ _____ PER MONTH X 8) \$ _____
- 7.) CLOTHING (\$ _____ PER MONTH X 8) \$ _____
- 8.) FOOD EXPENSES (\$ _____ PER MONTH X 8) \$ _____
- 9.) DAYCARE (\$ _____ PER MONTH X 8) \$ _____
- 10.) OTHER EXPENSES (PLEASE SPECIFY) \$ _____
- 11.) TOTAL EXPENSES \$ _____

I CERTIFY THAT THE ABOVE FULLY DISCLOSES ALL OF MY RESOURCES AND EXPENSES FOR THE CURRENT ACADEMIC YEAR.

DATE: _____ SIGNATURE: _____

IMPORTANT

**INCOMPLETE APPLICATIONS AND/OR INCOMPLETE FINANCIAL INFORMATION
WILL RESULT IN APPLICATION NOT BEING REVIEWED!**

STATEMENT

Should it be necessary for the Manitoba Citizen's Bursary Fund for Aboriginal Peoples Committee to check any of the above information with any agency, I hereby grant permission for the committee to do so on the understanding that all information will be kept strictly confidential within the Committee administering the Manitoba Citizens' Bursary Fund.

DATE: _____ STUDENT SIGNATURE: _____

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University Counsellor's Comments:

Date: _____ Counsellor's Signature: _____

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FOR OFFICE USE ONLY

1.) Financial Need	(range 0 to 8)	_____
2.) Academic Proficiency	(range 0 to 5)	_____
3.) Extra Curricular Activity	(range 0 to 2)	_____
TOTAL		_____

This form was reviewed by: _____

Signature: _____ Date: _____