



# Royal Canadian Legion

300 McCLELLAN AVE., KENORA, ONTARIO P9N 1A8 • PHONE 807-468-8192 • FAX 807-468-3059

NAME: \_\_\_\_\_

Currently Attending: \_\_\_\_\_ School

## LADIES AUXILIARY ROYAL CANADIAN LEGION BRANCH #12 BURSARY APPLICATION

### GENERAL REGULATIONS

1. Financial need and academic competence will be factors in selection.
2. Bursary money will be forwarded to applicant, when they indicate they are continuing their post secondary education, generally at the beginning of the first semester. A letter from the learning institution or copy of registration fees paid, is required as proof of intent.
3. All fully completed applications will be forwarded by the Schools to the Branch 12 Legion Office, 300 McClellan Avenue, Kenora on or before May 31<sup>st</sup>.
4. Incomplete applications will not receive consideration from the Awards Committee.
5. In some cases, preference will be given to sons, daughters, nieces, nephews, granddaughters, grandsons, etc. of members of participating Legion Associations.

**THE BURSARY COMMITTEE KEEPS THE INFORMATION SUPPLIED IN THIS APPLICATION IN THE STRICTEST CONFIDENCE.**



**D. THIS SECTION TO BE COMPLETED ONLY BY MARRIED APPLICANTS:**

Circle Status:

Working Full-Time      Working Part-Time      Unemployed  
Part-Time Student      Full-Time Student

Spouse's Estimated Gross Income  
During Academic Year: \_\_\_\_\_

Number of Children: \_\_\_\_\_ Ages: \_\_\_\_\_

Child Care Costs During Academic Year: \_\_\_\_\_

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**E. ONLY FOR SEPARATED, WIDOWED, AND/OR SINGLE-PARENT APPLICANTS.**

Number of Children: \_\_\_\_\_ Ages: \_\_\_\_\_

Annual Income from full-time and/or part-time work by applicant's parents: \_\_\_\_\_

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**F. APPLICANT'S FINANCIAL DATA FOR UP-COMING YEAR:**

**REVENUE**

**EXPENSES**

(Estimated costs: September to end of academic year)

Summer Earnings:      \$ \_\_\_\_\_      Tuition Fees:      \$ \_\_\_\_\_  
(Include All Income Sources)

Previous Savings:      \$ \_\_\_\_\_      Book costs:      \$ \_\_\_\_\_

Awards:      \$ \_\_\_\_\_      Rent:      \$ \_\_\_\_\_

OTHER, including  
UIC, Welfare, etc.      \$ \_\_\_\_\_      Transportation:      \$ \_\_\_\_\_  
Child Care:      \$ \_\_\_\_\_  
Incidentals:      \$ \_\_\_\_\_  
Automobile Costs:      \$ \_\_\_\_\_  
Other:      \$ \_\_\_\_\_

**TOTAL:**      \$ \_\_\_\_\_      **TOTAL:**      \$ \_\_\_\_\_

**G.** Do you own a motor vehicle?      Yes (   )    No (   )

If yes:    Year: \_\_\_\_\_    Make: \_\_\_\_\_    Model: \_\_\_\_\_

State reasons for needing vehicle: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**H.** Is an essay or statement attached?    Yes (   )    No (   )

The Bursary Committee recommends attaching a brief statement of your academic achievements and future goals.

If you are not attaching an essay, please provide a brief statement of how this bursary will contribute to the achievement of your future goals.

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**DATE**

\_\_\_\_\_  
**SIGNATURE**