

JUSTICE RONALD B. LESTER MEMORIAL BURSARY APPLICATION

Please ensure before you submit your application that you carefully read the information sheet associated with your bursary.

Applicant Information

Please ensure the following information is legible. We use email to contact successful applicants so please make sure the email you indicate is your primary email.

Last Name:		First Name:	
Secondary School:			
Street Address:			
City:		Postal Code:	
Home Phone:		Other Phone:	
Email Address:			
Please provide the name of the post-secondary institution you plan on attending with this award:			
What program and major are you planning on enrolling in?			

I, _____ have read the terms of the scholarships and certify that the attached information is true.

Applicant Signature

Date

Section 1 – Volunteer/Community Activities Details Write Up

What are your educational plans after High School graduation?

A) University	Name of Institution:	_____
	Program:	_____
B) College/Trade	Name of Institution:	_____
	Program:	_____

Select one of your volunteer activities. A) Why did you choose this volunteer area? B) Describe how you were involved. C) Would you continue in this volunteer area? Why or why not?

Section 2 - Letter of Reference and Personal Reference Details

Letter of Reference

Please provide a letter of reference from a supervising adult in a volunteer, school or work situation that outlines your suitability for this award specifically related to your record of involvement and participation in activities and initiatives directed toward the helping of others and a demonstrated concern for the welfare of others. A letter and a form are provided to give to your referee (Letter of Reference Information can be found on page 4 and the Letter of Reference Form found on page 5). Please have them seal the completed form in an envelope and submit the envelope with your application.

Personal References

Please provide the names, addresses and phone numbers of two other personal references that may be asked to provide input.

Referee
Name: _____

Email: _____ Phone: _____

Signature: _____

Date: _____

Referee
Name: _____

Email: _____ Phone: _____

Signature: _____

Date: _____

Section 3 - Letter of Reference Information

The Justice Ronald B. Lester Memorial Youth Foundation Bursary Award

Name of applicant: _____

Dear Referee:

The student named above is a candidate for the Justice Ronald B. Lester Memorial Youth Foundation Bursary Award.

The Justice Ronald B. Lester Memorial Youth Foundation is a provincially incorporated, charitable organization dedicated to creating opportunities for young people, who as a result of economic limitations may not otherwise be able to attend College or University. The Justice Ronald B. Lester Memorial Youth Foundation's goal is to help individuals further their educational pursuits and realize their highest potential and aspirations.

Consideration will be given to individuals who meet the following criteria:

- a) Clearly demonstrate financial need
- b) A record of involvement and participation in activities and initiatives directed toward the helping of others and a demonstrated concern for the welfare of others.
- c) Good academic standing

The Awards Review Committee would be grateful if you would send us a frank assessment of the candidate's character and all-round ability, especially as it related to criteria b) listed above.

A form has been provided along with this letter. Please feel free to use additional pages as necessary. When completed, please seal the letter in an envelope and return it to the candidate to be submitted with their application.

If you have any questions, please contact us.

Thank you,

Justice Ronald B. Lester Memorial Youth Foundation
Awards Review Committee
C/O The Thunder Bay Community Foundation
101- 312 N. Syndicate
Thunder Bay, ON P7G 2L4

(807) 475-7279

admin@tbcf.org

Section 4 - Letter of Reference Form

Your reply will be treated in the strictest confidence, to be read only by those whose duty it is to pass upon the qualifications of this application. Please submit in a sealed envelope to the applicant.

Referee

Name: _____

Email: _____ Phone: _____

Signature: _____

Date: _____

Applicant's
Name: _____

Section 5 - Financial Need Form

Foundation bursaries are granted to those whose financial circumstances would make it very difficult to attend College or University. If you wish to be considered for this award, we require the following information.

All information provided will be kept strictly confidential.

Applicants chosen for an interview will be asked to provide a *Canada Revenue Notice of Assessment* to verify stated income.

1. What the total income is as indicated on line 150 of the *Canada Revenue Notice of Assessment* in the previous year, for the following individuals?

	Year:
Mother/Guardian	\$
Father/Guardian	\$
Applicant	\$

If an income tax return was not filed, please indicate total income for that year.

2. Number of Parents in household one two
 Number of dependent children _____
 Number of children in post-secondary school (including applicant) _____
3. Amount held in RESPs (Registered Education Savings Plan) for applicant
 \$_____

4. Does the household currently own or lease vehicles? Yes No
 If yes, please indicate

	Make	Model	Year
1			
2			
3			

5. Please indicate how you are planning to pay for post-secondary expenses (specify %)

Applicant income/savings _____ Parents _____ Loans _____
 Other (specify) _____

6. Please identify any additional information that may have a bearing on your financial status. Some examples are: family circumstances, medical expenses or employment situations (layoffs).

Declaration

This is to certify that the financial information submitted is correct.

Date: _____

Applicant Name: _____

Applicant Signature: _____

Parent or Guardian Name: _____

Parent/Guardian Signature: _____