

**Application Deadline:** \*September 30<sup>th</sup>

Complete only one application form to be considered for all General Awards Program awards. **Please print in ink.**

Detailed descriptions of all scholarships and awards offered through Kwantlen University College can be found at [www.kwantlen.ca/awards](http://www.kwantlen.ca/awards)

Completed applications must be signed and submitted to the Financial Awards office on any campus. Incomplete applications will not be considered.

**PERSONAL INFORMATION:**

Student Number:	Social Insurance Number:
Last Name:	First Name:
<input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married/Common-law <input type="checkbox"/> Single Parent
Phone number:	Email address:
Birthdate (dd/mm/yyyy)	

*\*Where a deadline falls on a weekend or statutory holiday, it will move to 4:30 pm of the next business day.*

**For office use only:**

**Award Name** \_\_\_\_\_ **Amount \$** \_\_\_\_\_

**Award Name** \_\_\_\_\_ **Amount \$** \_\_\_\_\_

**Kwantlen University College**  
**2006/2007 General Awards Application Form**

**PERSONAL PROFILE:**

**A.** Provide a brief summary of your current participation in community or college events, including any unpaid volunteer activities. Please attach a letter of reference for each activity.

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**B.** Provide a brief statement outlining your career goal.

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**SPECIFIC AWARD CRITERIA:**

Some scholarships and awards have very specific eligibility criteria. To ensure that you are considered for all awards you are eligible for, please check any of the applicable information listed below that applies to you:

- I am a First Nations student
- I am applying for the Envirotest Canada Environmental Protection award and have submitted an essay for consideration
- I have a permanent disability (please give details below)  
i.e. legally blind, paraplegic \_\_\_\_\_
- My parent(s) are employed as stated by the criteria for the Ko Sato Memorial award
- I have dependent children (please list the ages of each child) \_\_\_\_, \_\_\_\_, \_\_\_\_,

I have attached documentation which identifies me or my family (as applicable), as a member of:

- Beta Sigma Phi
- Envision Credit Union
- CUPE Local 15

**Kwantlen University College  
2006/2007 General Awards Application Form**

**Budget Form**

(Only required if you wish to be considered for any awards where  
"financial need" is part of the criteria)

<b>STUDY PERIOD MONTHLY COSTS</b>	Student	Spouse
Rent/Mortgage		
Food		
Utilities		
Transportation (Bus/Gas)		
Medical/Dental		
Credit Card Payments		
Child Care Costs(inc. subsidy)		
Child Support/Alimony you pay		
Loan Payments		
Clothing, etc.		
Misc. Expenses		
Other		

**Total Monthly  
Costs** = \$ \_\_\_\_\_  
**Multiply By Study  
Months** X \_\_\_\_\_ = \_\_\_\_\_

<b>STUDY PERIOD MONTHLY INCOME</b>	Student	Spouse
Net Income From Work		
Money from Parents		
Child Care Subsidy		
Child/Spousal Support		
Canada Employment & Immigration		
EI, WCB, EPPD Benefits		
Sponsored Tuition/Books		
Income Assistance		
Native Band Allowance		
Pension Income (CPP, Orphans, etc.)		
BC Family Bonus		
Other		

**Total Monthly  
Income** = \$ \_\_\_\_\_  
**Multiply By Study  
Months** X \_\_\_\_\_ = \_\_\_\_\_

(STUDY MONTHS = THE NUMBER OF MONTHS BETWEEN YOUR CLASS START AND END)

<b>One Time Costs</b>	Student	Spouse
Tuition & Fees		
Books/Supplies		
Insurance(car, house, renter's)		
Property Taxes		
Other		

**Add One Time  
Cost** = \$ \_\_\_\_\_  
**Total Study  
Period Costs** = \_\_\_\_\_

<b>One Time Income</b>	Student	Spouse
Savings at Start of Classes		
Sale of Assets		
Bursaries (school/private)		
Scholarships		
Other		

**Add One Time  
Income** = \$ \_\_\_\_\_  
**Total Study Period  
Income** = \_\_\_\_\_

COSTS – INCOME = \_\_\_\_\_  
**(Financial Need)**

office use only:

BCSAP \_\_\_\_\_

Did you apply for a student loan?

Yes  No  If yes, please indicate the amount you will receive  
for the study period indicated above \$ \_\_\_\_\_

**Kwantlen University College**  
**2006/2007 General Awards Application Form**  
**STUDENT RESPONSIBILITIES**

Scholarships and Awards are made possible by the generous contributions of individuals and organizations who believe in providing financial assistance to students wishing to pursue an education. If you are selected for an Award, you are expected to:

- Show appreciation for all Awards received by thanking the donor(s) in writing
- Attend the Scholarships & Awards Ceremony

**A complete General Awards Program application must be accompanied by:**

- a minimum of one letter of reference from an instructor (copies are available from our website at [www.kwantlen.ca/awards](http://www.kwantlen.ca/awards))
- a letter of reference for each volunteer/community activity indicated in your application
- supporting documentation relevant to any specific award criteria that you checked on your General Awards Program application

*If you or your guest(s) require disability accommodation for the ceremony please check the appropriate box and a Kwantlen Disability Advisor will contact you to arrange for accommodation.*

YES

NO

Please provide a brief comment about yourself that can be included in the commentary for the Awards presentation at the Scholarships & Awards ceremony.

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**DECLARATION**

I hereby declare that the information on this application and the attached forms are, to the best of my knowledge, correct and complete. A submitted application implies consent to the review of information provided to the Scholarships and Awards Committee(s). The information submitted in this application is subject to verification and audit. Those who receive awards consent to the release of their name and image for publication. In signing this application for Scholarships and Awards, I understand that this information will be used for the purposes of determining eligibility for Scholarships and Awards and other purposes consistent with the mandate of the institution. The use of this information will be protected and used in compliance with the Freedom of Information and Protection of Privacy Act. I understand that my signature certifies and confirms all information on all documents I have submitted as part of this application package.

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**SIGNATURE OF APPLICANT**

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**DATE SIGNED (Day/Month/Year)**