

**BIAC-ACLC BURSARY PROGRAM 2008  
APPLICATION FORM**

**PERSONAL INFORMATION**

Applicant's full name: \_\_\_\_\_

Gender: M / F                      Studies to be pursued in: English \_\_\_\_\_                      French \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Telephone where you may be contacted: \_\_\_\_\_

If you have dependents, please list them (name & age): \_\_\_\_\_

\_\_\_\_\_

**ACADEMIC INFORMATION**

(Complete the section below and include your statement of marks for all post-secondary studies)

Describe all your post-secondary studies to date

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Subject / Type of program / Name of academic / training institution / Date completed

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**APPRAISAL FORMS**

It is your responsibility to supply your appraisers with a copy of the appraisal form that can be found with this application. Appraisal forms should be from individuals who are associated with the last academic or training institution in which you were enrolled or, if you did not attend an educational institution in the previous three years, then from someone who knows your work or studies. Completed appraisal forms are to be submitted with this Application Form.

## INSTITUTIONS

List all the post-secondary education or training institutions of programs you have applied to, and whether you have been conditionally or unconditionally accepted.

Name of school / program / Conditional acceptance / Unconditional acceptance / Application date

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## REASONS FOR SEEKING FINANCIAL ASSISTANCE

A short essay must be attached to this Application Form to explain (in 200 words or less) how a bursary would make a difference in your ability to pursue post-secondary education or apprenticeship/trades programs, and how this education or training will make a difference in your life.

## FINANCIAL INFORMATION

<b>Income in 2007 (estimated or actual)</b>	<b>Amount</b>
Employment income (full or part time)	
Insurance income (e.g. disability, unemployment)	
Other income Please specify type of income: (e.g. from family, child support, etc.)	
<b>Total income in 2007</b>	

Do you expect your income in 2008 to be approximately the same as in 2007? Yes / No  
If no, please explain:

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<b>Estimated expenses for 2008/09 school year</b>	<b>Amount</b>
Tuition and compulsory fees	
Books and supplies	
Living costs (e.g. food, shelter, transportation, utilities)	
Other financial obligations (please explain):	
<b>Total estimated expenses</b>	

## COLLECTION OF PERSONAL INFORMATION

BIAC-ACLC may use relevant personal information to administer the BIAC-ACLC Bursary Program and to determine each applicant's eligibility. It may also use personal information for statistical and evaluation purposes.

## DECLARATION

- I understand and have given complete and true information on this form and accompanying attachments.
- I understand that I am responsible for providing to BIAC-ACLC all required information and documents by April 30th, 2008.
- I understand that the information I provide may be verified.
- I understand that any changes to information I have provided will result in re-assessment.
- I understand that I must submit and changes (such as change of address, employment, etc.) promptly to BIAC-ACLC.
- I agree to having my photo and general information published on the BIAC-ACLC website and newsletter.

I have read and understood this section and my signature attests to my consent to the indirect collection and disclosure of my personal information for statistical and evaluation purposes only.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IMPORTANT: Only the original application form, Appraisals and Proof of Brain Injury, with original signatures will be accepted. All copies, e-copies or scanned copies will be refused automatically without any further notice. Other documents may be submitted as copies.**

## CHECKLIST

Applicants must ensure that the following information is provided with this Application Form:

- Sign and date the Declaration
- Acceptance letters from post-secondary institutions or training programs when available
- Appraisal Forms
- Official transcripts for all post-secondary education or training
- A short essay explaining why financial assistance is being sought and how it will affect your life.
- Proof of a brain injury. This may be in the form of a doctor's certificate, or letter of attestation by a regional, provincial or national brain injury association or other respected body (e.g. physiotherapist, school Principal).

## PRIVACY POLICY

At the Brain Injury Association of Canada, we recognize the importance of privacy and are committed to maintaining the accuracy, confidentiality and security of your personal information.