

# Bursary Application

**Application deadline:** September 11, 2020

Return to [finaid@langara.ca](mailto:finaid@langara.ca) from your myLangara or preferred email account.

It is the student's responsibility to ensure this application is completed in full. Please complete your application by filling out the form online or by ink and emailing your completed application to [finaid@langara.ca](mailto:finaid@langara.ca). Applications submitted that are missing information may result in disqualification. Please attach a copy of your unofficial transcript to the application you will be submitting by email. It can be downloaded through [Langara's Student Information System](#). If you are unable to print and sign your application in ink or e-sign your application, please ensure it is submitted via your myLangara or preferred email.

## STUDENT INFORMATION

Legal last or family name: \_\_\_\_\_

Legal first or given name: \_\_\_\_\_

Langara ID: \_\_\_\_\_ Gender:  Woman  Man  Non-binary  Choose not to disclose

Social Insurance Number (SIN): \_\_\_\_\_ Date of birth (YYYY/MM/DD): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Program of study: \_\_\_\_\_

### Citizenship status

Canadian Citizen  Permanent Resident  Protected person  International student

**Marital status (check all that apply)** *\*If you are a single parent and living common-law, please check both boxes*

Single  Separated/Divorced  Married  Single parent  Common-law

While in studies, will you be living with your parent(s)/stepparent/legal guardian or live in a home rented or owned by them?

Yes  No

Number of children/dependants: \_\_\_\_\_ Ages: \_\_\_\_\_

If you are a single parent, are your children living with you?

Yes  No

I wish to declare that I am of Indigenous ancestry.

Yes  No

Do you have a permanent disability with StudentAid BC or are you registered with Langara Accessibility Services and receiving accommodations?

Yes  No

Have you lived as a Youth in Care in British Columbia?

Yes  No

This application will assess you for all available bursaries that you qualify for. If you are applying for a particular bursary, please specify: \_\_\_\_\_

You will be notified of your eligibility by email by the end of the third month of the term (Mar, Jul, Nov). If you are denied, you are able to appeal our decision and will be given a time frame to do so. If you are successful, you may have your bursary first applied towards any outstanding tuition. Please ensure you review your balance with Langara, upon receipt of any bursary funds. Any remaining funds will be made available as a cheque provided by Registrar & Enrolment Services. A thank you note to our bursary donors may be requested.

**snəwəyət leləm.**

THE COLLEGE OF HIGHER LEARNING.

**Langara.**

THE COLLEGE OF HIGHER LEARNING.

COMPLETE SPENDING PLAN FOR YOU (AND SPOUSE) FOR THE CURRENT TERM (FOUR MONTHS)

Estimated Resources Available for the Entire Term (and Spouse/Common-law Partner)		Estimated Expenses for You (and Spouse/Common-law Partner)	
Savings as of the first day of the term <i>Do not include student loan funding</i>	\$	Tuition	\$
Net After Tax Income from Work	\$	Books and Supplies	\$
Government Student Loans	\$	Rent or Mortgage <i>If you live with your parent/stepparent and pay rent, please supply copies of bank statements for the last 4 months</i>	\$
Government Student Grants	\$		
EI/PWD/Income Assistance	\$	Utilities <i>Cell, internet, hydro, etc.</i>	\$
Sponsored Funding (Indigenous/Gov't) <i>Including living costs, tuition, and books</i>	\$	Food	\$
Financial Assistance from Parents or Other Family	\$	Clothing	\$
Spouse/Common-law Partner's Net Income	\$	Miscellaneous (hygiene, household, fitness) <i>Must detail below</i>	\$
Credit Cards/Line of Credit <i>The amount of debt you need to use to help pay for your expenses for this term</i>	\$	Childcare (Include subsidy)	\$
		Transportation <i>Must detail below</i>	\$
Childcare Subsidy	\$	Medical/Dental (not covered by Langara Health/Dental Plan) <i>Must detail below and submit receipts</i>	\$
GST Rebate and/or Canada Child Benefit	\$	Exceptional <i>Must detail below and submit receipts</i>	\$
Any Other Income Resources	\$	<i>Please note that miscellaneous, transportation, medical dental, and exceptional expenses will not be considered unless they are detailed below</i>	
<b>Total Resources</b>	<b>\$</b>	<b>Total Expenses</b>	<b>\$</b>

_____	-	_____	=	_____
Total Expenses (\$)		Total Resources (\$)		Total Need (\$)

**EXPENSE DETAILS** (Miscellaneous, transportation, medical dental, and exceptional expenses will not be considered unless they are detailed below)

Miscellaneous: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Transportation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Medical/Dental (Receipts or estimates from the professional required): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Exceptional (Receipts or documentation required): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please explain what circumstances have made it necessary for you to apply for a bursary and/or if you have a financial emergency (Attach an additional page if necessary).

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Please outline your school/community involvement in extracurricular activities and demonstrated leadership performance. (Attach an additional page if necessary).

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**AUTHORIZATION TO RELEASE INFORMATION RELATING TO BURSARIES**

- 1. By signing this release, you consent that, a Financial Aid Advisor or designate may disclose your personal information, including your name and program, to the donor of any bursary awarded. The donor may use the information for auditing or reporting purposes.  Yes  No
- 2. By signing this release, you consent that, the Langara College Foundation may use any comments you make in your thank you letter to promote scholarships and bursaries.  Yes  No

**COLLECTION, USE, AND DISCLOSURE OF STUDENT INFORMATION**

- 1. All information provided on this application is complete, accurate, and truthful to the best of my knowledge.
- 2. Langara College collects the information on this form under the authority of the College and Institute Act [RSBC 1996, Ch. 52, S. 41.1]. Financial Aid Services will use and disclose the information to review, process, and award bursaries and scholarships to eligible students in compliance with the provisions of the Freedom of Information and Protection of Privacy Act [RSBC 1996, Ch. 165]. Any information disclosed in this application is subject to audit and you may be asked to provide proof of any expenses or income listed in the application. Direct questions about compliance with the Freedom of Information and Protection of Privacy Act to the Associate Registrar, Financial Aid Services, Langara College, 100 West 49<sup>th</sup> Avenue, Vancouver, B.C., V5Y 2Z6, Phone: 604.323.5219.

Please note: a T4A will be issued for all awards greater than \$500. For more information, please visit the CRA website.

Please remember to sign your application. Incomplete applications may be delayed.

Student's signature

Date signed (YYYY/MM/DD)

**OFFICE USE ONLY**

Date received:	Canadian Citizen/PR/Protected Person: <input type="checkbox"/> Yes <input type="checkbox"/> No		
CGPA:			
Total Need:	FAO Initial:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied <input type="checkbox"/> Appealed
Donor:	Fund:	Amount:	Manager:
Donor:	Fund:	Amount:	Manager: