



## **GLENFIR BURSARY PROGRAMME**

Bursaries are available for all families, current or new, who are in need of financial assistance in regards to tuition so that their son or daughter may attend Glenfir.

Six (6) bursaries, at \$2,500, are available to families who are in need of financial assistance in regards to school tuition for the 2009/2010 school year.

### **Procedure for application:**

1. Complete the confidential Bursary Application form. This is a detailed form, which outlines a family's monthly income and expenses.
2. The admissions panel, including an independent outside financial specialist reviews the information provided by the bursary application, and then based on each family's need and available funds, allocate bursaries.
3. Factors that are considered when allocating bursaries include:
  - a. Parent's completion of personal financial statements and submissions of appropriate income tax forms
  - b. The students academic performance
  - c. The family's participation in the school community for previous and upcoming years
  - d. All Glenfir accounts must be in good standing with the business office.
4. Families are required to complete the Bursary Application form by April 15, 2009 for the 2009/2010 school year. The admissions panel will review each application and award bursaries based on the above noted criteria by June 1, 2009.



## BURSARY APPLICATION FORM

This application must be completed for each student for whom you wish to apply for bursary assistance:

### FATHER

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

### MOTHER

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

### COMMON LAW SPOUSE (if applicable)

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

### GUARDIAN

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

**STUDENT RESIDES WITH:** \_\_\_\_\_

**STUDENT'S NAME:** \_\_\_\_\_ **PRESENT GRADE:** \_\_\_\_\_

**NUMBER OF CHILDREN IN YOUR FAMILY:** \_\_\_\_\_



## GROSS ANNUAL FAMILY INCOME

	FATHER	COMMON LAW SPOUSE	MOTHER	COMMON LAW SPOUSE	TOTAL
<b>ANNUAL INCOME</b>					
<b>Employment Income</b>					
<b>Investment Income</b>					
<b>Business Income</b>					
<b>Alimony/Child Support</b>					
<b>Rental Income</b>					
<b>Other Income (attach details)</b>					
<b>TOTAL INCOME</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**Notes:**

1. If income from previous year and/or projected income for next year differs by more than 15%, please explain: \_\_\_\_\_  
\_\_\_\_\_
  
2. Please attach a detailed capital losses/gains or other non-recurring items during the past three years and/or contemplated for next year.
  
3. All income stated above must be supported by copies of your current year's income tax return to include your T4 documentation from sources of income for the most recent year.



## DETAILED MONTHLY EXPENSES

HOUSING		ENTERTAINMENT	
Mortgage or Rent		Video/DVD	
Second Mortgage or Rent		CDs	
Phone		Movies	
Electricity		Concerts	
Gas		Sporting Events	
Water and Sewer		Live Theatre	
Cable		Other (attach details)	
Waste Removal		<b>Subtotal</b>	
Maintenance and Repairs		<b>LOANS</b>	
Supplies		Personal 1	
Other (attach details)		Personal 2	
<b>Subtotal</b>		Credit Card 1	
<b>TRANSPORTATION</b>		Credit Card 2	
Vehicle 1 payment		Credit Card 3	
Vehicle 2 payment		Other (attach details)	
Bus/Taxi fare		<b>Subtotal</b>	
Insurance		<b>SAVINGS OR INVESTMENTS</b>	
Licensing		Retirement Account	
Fuel		Investment Account	
Maintenance		College	
Other (attach details)		Other (attach details)	
<b>Subtotal</b>		<b>Subtotal</b>	
<b>INSURANCE</b>		<b>GIFTS AND DONATIONS</b>	
Home		Charity 1	
Health		Charity 2	
Life		Charity 3	
Other (attach details)		Other (attach details)	
<b>Subtotal</b>		<b>Subtotal</b>	
<b>FOOD</b>		<b>TAXES</b>	
Groceries		Federal	
Dining Out		Provincial	
Other (attach details)		Property	
<b>Subtotal</b>		Other (attach details)	
<b>CHILDREN</b>		<b>Subtotal</b>	
Medical		<b>LEGAL</b>	
Clothing		Attorney	
School Tuition		Alimony	
School Supplies		Payments on lien or judgment	
Organization dues or fees		Other (attach details)	
Lunch Money		<b>Subtotal</b>	
Child Care		<b>PETS</b>	
Toys/games		Food	
Other (attach details)		Medical	
<b>Subtotal</b>		Grooming	
<b>PERSONAL CARE</b>		Toys	
Medical		Insurance	
Hair/Nails		Other (attach details)	
Clothing		<b>Subtotal</b>	
Dry Cleaning			
Health Club			
Organization Fees or Dues			
Other (attach details)			
<b>Subtotal</b>		<b>TOTAL</b>	<b>\$</b>



## NET WORTH

<b>ASSETS</b>	<b>\$</b>	<b>LIABILITIES</b>	<b>\$</b>
Cash		Current Debt	
Marketable Securities		Mortgage	
RRSP		Other (attach detail)	
Antiques, Jewelry, Art			
Recreational Assets (cottage, etc.)			
Household effects			
Motor Vehicles			
Principal Residence			
Other (attach detail)			
<b>TOTAL ASSETS</b>			
<b>NET WORTH (SUBTRACT LIABILITIES FROM ASSETS)</b>			<b>\$</b>