

**Kiwanis Club of Kitchener-Waterloo**  
**2023 Bursary Application Form**  
**Part "A"**  
**(To be completed by student applying for bursary)**

APPLICANT NAME: \_\_\_\_\_

Full Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

School Now Attended: \_\_\_\_\_

Birth Date: \_\_\_\_\_  
Day Month Year

I intend to enrol in: \_\_\_\_\_  
(Name of intended Course)

At: \_\_\_\_\_  
(Name of intended University or College)

During the next school year I intend to reside at: \_\_\_\_\_  
\_\_\_\_\_

After completing university / college I intend to pursue a career as: \_\_\_\_\_  
\_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Address: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Address: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Guardian's Name (if applicable): \_\_\_\_\_

Guardian's Address: \_\_\_\_\_

Guardian's Occupation: \_\_\_\_\_

Of the persons named above, my \_\_\_\_\_ is/are responsible for my support.  
(father, mother, guardian)

Their total gross income last year from all sources was approximately \$ \_\_\_\_\_

They are / are not able to contribute to the cost of my education next year.  
If able to contribute, to the amount of \$ \_\_\_\_\_

I am now employed as \_\_\_\_\_

By: \_\_\_\_\_  
(Employer Name and Address)

I will / will not be able to assist myself next year through my earnings or savings to the extent of \$ \_\_\_\_\_ through (circle applicable items):

- a) Summer employment
- b) Employment during next year's school term
- c) Both of the above
- d) Other sources \_\_\_\_\_

(Give particulars)

Listed below are other persons in addition to myself who are dependent upon the person who is responsible for my support.

Name	Age	Occupation	Relationship to Applicant

If any of the above dependents are over 21 years of age, list reason for dependency:

---



---



---

If any dependents listed above are infirm, list names and give particulars:

---



---

During the current year I have engaged in the following extra-curricular activities:

---



---



---



---

**PLEASE NOTE:** The \$1,000 bursary, for purposes of tuition payment or purchase of course books, will be awarded to the successful applicant in the form of a Certificate. The actual **Bursary Cheque will be issued** in the name of the recipient, **only after proof of registration to a post secondary institution and the recipient's Social Insurance Number is presented to the Bursary Selection Committee.**

**Please return this completed application form to the school staff member, from whom you received it, early enough so that it can be returned to the Kiwanis Club no later than Friday, April 28, 2023.**

**DECLARATION**

I, the undersigned, hereby declare that to the best of my knowledge, the information given in this application is true in all respects.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date