

# ENTRANCE BURSARY APPLICATION 2023/24

**Return to:**

Jane Parker, Financial Aid - Room W40

Huron University College, 1349 Western Rd. London, ON N6G 1H3 | 519-438-7224 x215 [mjparker@huron.uwo.ca](mailto:mjparker@huron.uwo.ca)

Huron Student # (if known) or date of birth: \_\_\_\_\_

**\*\*Are you the first in your family to attend post-secondary education?**  Yes  No

**If so you may also qualify for an "Ontario First Generations Bursary." You will be contacted with further instruction.**

**(APPLICATION IS FOR FIRST YEAR SINGLE, NON-MARRIED STUDENTS GRADUATED FROM SECONDARY SCHOOL WITH NO PRIOR POST-SECONDARY STUDIES. ALL OTHERS SHOULD CONTACT THE FINANCIAL AID OFFICE.)**

Entrance bursaries up to \$3,000 per annum are available to full time students who satisfy the admission requirements for Huron University College and who demonstrate financial need. These bursaries are subtracted from the costs of tuition fees. Applicants who wish to be considered should complete and return this form (address above) as soon as possible. This bursary is renewable for up to 4 years, provided you continue to demonstrate financial need and maintain a 70% average across at least four full courses completed in the previous year. You must reapply annually.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

SIN #: \_\_\_\_\_ (required for income tax purposes)

Parents' Address: (include city) \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Canadian \_\_\_\_\_ Other (specify) \_\_\_\_\_

Home Province: \_\_\_\_\_ Ont: \_\_\_\_\_ Other: \_\_\_\_\_

Course Load: \_\_\_\_\_ %  Male  Female Do you have any dependants?  Yes  No

If yes, please list the ages: \_\_\_\_\_

## YOUR FINANCIAL INFORMATION

**1.** Enter an estimate (in dollars only) of the total gross income from all sources that you expect to receive during the 16-week period prior to the start of your 2023/24 study period. Please include employment, government benefits, child-support, and other taxable and non-taxable income.

\$ \_\_\_\_\_

Is this figure mainly a source of government assistance, national or regional subsidized assistance?  Yes  No

If so, please describe \_\_\_\_\_

## YOUR FINANCIAL INFORMATION CONTINUED

---

2. Do you plan to apply for, or have you received, OSAP (or other provincial student financial aid) for 2023/24?

Yes  No Assessment (if known): \$ \_\_\_\_\_

(if No, please provide details) \_\_\_\_\_

3. Have you received, or do you expect to receive a scholarship or award from Huron University College or Other?

Yes  No Specify: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

4. Do you own a vehicle?  Yes  No If yes: Make: \_\_\_\_\_ Model: \_\_\_\_\_

Year: \_\_\_\_\_ Current Gross Market Value: \$ \_\_\_\_\_

5. Do you hold other assets? (RRSPs, RESP's, GICs, bonds, bank account balances, other)

If yes what is the total value: \$ \_\_\_\_\_

## SUPPLEMENTAL INFORMATION

---

Please provide a brief description of extra-curricular activities you have participated in and/or any participation in volunteer community groups:

## INFORMATION FROM PARENTS

---

This section must be completed by your parent(s), step parent(s), legal guardian(s), or official sponsor(s) if you are considered a "dependant student" (which is defined as a student who has not been out of high school for four years),

1. What is parents' current marital status?  Married or common-law  Divorced  Widowed  
 Single  Separated

2. Net Combined Annual Income: \$ \_\_\_\_\_

Is the main source of the above figure provincial social assistance (eg. Family Benefits, General Welfare, Vocational Rehabilitation Services Benefits)?  Yes  No

3. Do you have other children attending post-secondary educational institutions?  Yes  No

If yes, how many? \_\_\_\_\_ Are all children studying within the province?  Yes  No

If no, how many are studying out of the province? \_\_\_\_\_

# DECLARATION OF PARENT(S), STEP-PARENT(S), LEGAL GUARDIAN(S), OR OFFICIAL SPONSOR(S)

---

I have given true and complete information on this form. I understand that the personal information I have provided is for office use only and will be used in the assessment of bursary eligibility. If it is found that I have provided false or misleading information, I understand that the bursary application may be cancelled, or any monies awarded may be revoked.

\_\_\_\_\_  
Signature of Father/Stepfather/Legal guardian/Official sponsor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Mother/Stepmother/Legal guardian/Official sponsor

\_\_\_\_\_  
Date

**DECLARATION OF STUDENT:** I certify to the best of my knowledge, the above information is true and correct, and that I require additional funds to continue my studies. I understand that if any information is found to be untrue, this application may be considered cancelled and any money received as a result of it will have to be paid back. I consent to the use of personal information provided on this application or accompanying documentation, including my social insurance number, for the purpose of determining my eligibility for financial assistance. I consent to the disclosure of information on this application to the Ministry of Training, Colleges, and Universities and any other source when necessary for audit and verification of the information provided. Documentation may be requested at a later date based on an audit.

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

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

## FOR OFFICE USE:

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

Award: \_\_\_\_\_

Award Declined: \_\_\_\_\_

Authorization: \_\_\_\_\_