

JOUBIN-SELIG OTSS BURSARY PROGRAM 2011/2012

ABOUT THIS BURSARY PROGRAM	A bursary is a non-repayable award given on the basis of financial need. This bursary was established by the Franc R. Joubin Trust/Marion, Marea and David Selig through the Ontario Trust for Student Support (OTSS) to assist gifted and/or financially needy students to study enrichment programs in their field of study in Canada and internationally. Approximately \$20,000 is available annually – \$10,000 in each of the Fall and Winter semesters. This amount will be divided in order to support more than one student in each semester, if necessary.
ELIGIBILITY TO APPLY	<p>Students must meet the following criteria in order to apply for a bursary through this program:</p> <ul style="list-style-type: none"> • Be participating in the Mobility/Exchange Program during their 3rd year of undergraduate study and be studying at a school with which OCADU has an official exchange agreement in either the Fall or Winter semesters. • Be a Canadian Citizen, Permanent Resident or Protected Person • Be an Ontario resident • Demonstrate financial need (priority is given to OSAP students; non-OSAP students will only be considered if funds are available) • The bursary is tenable upon proof of registration at the host institution. • Recipients will be required to submit a thank you letter upon receipt of their award and a written report about their experience upon completion of their studies abroad. The report will be forwarded to the donors and should include images of any work produced during the semester.
APPLICATION PROCEDURES & DEADLINE	<p>Students must submit a completed application form identifying their estimated financial need, along with a Letter of Intent regarding their proposed studies. All applicants will receive an email advising them of the results of their application whether successful or unsuccessful.</p> <p>FALL SEMESTER: The deadline to apply is Monday, July 18, 2011, 4 pm. Results will be sent by the end of August.</p> <p>WINTER SEMESTER: The deadline to apply is Tuesday, November 15, 2011, 4 pm. Results will be sent by mid-December.</p> <p>Submit completed applications to the Financial Aid & Awards office:</p> <ul style="list-style-type: none"> • By mail: OCADU Financial Aid & Awards Office, 100 McCaul Street, Toronto, ON M5T 1W1 • By fax: Attention OCADU Financial Aid & Awards Office, 416-599-4958 • In person: Financial Aid & Awards Office, 51 McCaul Street, Level 1 <p>If you feel that there is other information we should take into account in reviewing your bursary application, please feel free to attach a letter and/or supporting documentation to this application.</p>
FOR MORE INFORMATION	<p>Contact the Financial Aid & Awards office by phone (416-977-6000) or email:</p> <ul style="list-style-type: none"> • Vanessa Armstrong, Financial Aid Administrator Ext. 391 varmstrong@ocad.ca • Kelly Faller, Financial Aid Assistant Ext. 257 kfaller@ocad.ca • Vilma Short, Financial Aid Administrator Ext. 231 vshort@ocad.ca

PERSONAL INFORMATION - ALL SECTIONS MUST BE COMPLETED

LAST NAME	FIRST NAME	STUDENT #	
MAILING ADDRESS		CITY / PROVINCE	POSTAL CODE
EMAIL ADDRESS	PROGRAM & AREA	YEAR LEVEL	AGE
CITIZENSHIP STATUS: <input type="checkbox"/> CANADIAN CITIZEN <input type="checkbox"/> PERMANENT RESIDENT <input type="checkbox"/> PROTECTED PERSON			
HOW MANY CREDITS WILL YOU BE REGISTERED IN FOR THE 2011/2012 ACADEMIC YEAR? _____ FALL 2011 _____ WINTER 2012			
MOBILITY/EXCHANGE PROGRAM INFORMATION: IN WHICH SEMESTER WILL YOU BE ON THE MOBILITY/EXCHANGE PROGRAM? <input type="checkbox"/> FALL 2011 <input type="checkbox"/> WINTER 2012 HOST INSTITUTION NAME: _____ LOCATION OF HOST INSTITUTION: _____ PROGRAM OF REGISTRATION AT HOST INSTITUTION: _____ Include a Letter of Intent regarding your proposed studies along with your application.			
PERSONAL STATUS: <input type="checkbox"/> SINGLE / DEPENDENT – GRADUATED FROM HIGH SCHOOL AUGUST 2007 OR LATER (DATE: Y _____ / M _____) <input type="checkbox"/> SINGLE / INDEPENDENT – GRADUATED FROM HIGH SCHOOL PRIOR TO AUGUST 2007 (DATE: Y _____ / M _____) <input type="checkbox"/> SINGLE / INDEPENDENT – SEPARATED / DIVORCED / WIDOWED <input type="checkbox"/> MARRIED / COMMON-LAW / SAME-SEX RELATIONSHIP SINCE THE FOLLOWING DATE: Y _____ / M _____ / D _____ <input type="checkbox"/> SOLE-SUPPORT PARENT WITH _____ DEPENDENT CHILDREN UNDER THE AGE OF 19 YEARS OF AGE IN MY CUSTODY.			

FINANCIAL INFORMATION - ALL SECTIONS MUST BE COMPLETED

FINANCIAL ASSISTANCE CATEGORY:

- I HAVE APPLIED FOR GOVERNMENT FINANCIAL ASSISTANCE THROUGH OSAP OR ANOTHER PROVINCE/COUNTRY FOR THE COMING YEAR.
- I HAVE NOT APPLIED FOR GOVERNMENT FINANCIAL ASSISTANCE THROUGH THE OSAP PROGRAM OR ANOTHER PROVINCE OR COUNTRY.

PERSONAL MONETARY ASSETS: LIST ALL YOUR MONETARY-BASED ASSETS, INDICATING AMOUNT AND TYPE.

- I DO NOT HAVE ANY MONETARY-BASED ASSETS.
- I HAVE MONETARY ASSETS IN THE FORM OF RRSPs, MUTUAL FUNDS, SAVINGS ACCOUNT, TOTAL AMOUNT: \$ _____
GICS, SAVINGS BONDS, OR OTHER INVESTMENTS. **ASSET TYPE:**

2011/2012 BUDGET & FINANCIAL NEED ASSESSMENT

TOTAL 2011/2012 STUDY PERIOD COSTS	FALL SEMESTER COSTS SEPT. 1 TO DEC. 31, 2011 (4 MONTHS)	WINTER SEMESTER COSTS JAN. 1 TO APR. 30, 2012 (4 MONTHS)
Tuition and compulsory fees payable to OCADU		
Art supplies, books, materials		
Travel and other special Mobility/Exchange costs related to your proposed program of studies (specify)		
Total exceptional expenses (specify)		
Medical & dental costs not covered by insurance		
Rent / Room & Board & Utilities		
Local transportation (bus)		
Child care		
Food / Personal Toiletries / Sundries		
Credit card / debt repayment (minimum payment)		
Entertainment / Eating out		
Other (specify)		
TOTAL 2011/2012 COSTS	★ (A)	★ (C)
TOTAL 2011/2012 STUDY PERIOD RESOURCES	FALL SEMESTER RESOURCES SEPT. 1 TO DEC. 31, 2011 (4 MONTHS)	WINTER SEMESTER RESOURCES JAN. 1 TO APR. 30, 2012 (4 MONTHS)
Accumulated savings at the start of the study period		
Monetary support from family, spouse or friend		
Study period employment income		
Child support and/or child tax benefit allowance		
Other monthly income (specify)		
Total OSAP or other provincial assistance, including loans, scholarships and bursaries		
Private bank loan or line of credit		
Internal or External Scholarships, Bursaries or Awards		
TOTAL 2011/2012 RESOURCES:	★ (B)	★ (D)
TOTAL 2011/2012 STUDY PERIOD FINANCIAL NEED	FALL SEMESTER FINANCIAL NEED	WINTER SEMESTER FINANCIAL NEED
TOTAL COSTS MINUS TOTAL RESOURCES. IF YOUR COSTS ARE GREATER THAN YOUR RESOURCES YOU HAVE DEMONSTRATED FINANCIAL NEED. NOTE: IF YOUR RESOURCES ARE GREATER THAN YOUR COSTS, YOU DO NOT DEMONSTRATE NEED.	★ (A-B)	★ (C-D)

PROTECTION OF PRIVACY STATEMENT:

At OCADU, we recognize and respect the importance of your privacy. Personal information is collected, used, disclosed and kept confidential in accordance with the Freedom of Information and Protection of Privacy Act. The Financial Aid & Awards Office will use the information collected on this form to process your application and decide on your eligibility for the Joubin-Selig OTSS Bursary Program. Once an award has been granted, OCADU may disclose certain information to the donor of the award with your consent and to provincial funding organizations as set out below. Questions about the collection and disclosure of this information can be directed to the Financial Aid & Awards office.

CONSENT AND SIGNATURE:

I have read and agree to the following:

1. The information I have provided on this form is complete and accurate, and I will notify the Financial Aid & Awards Office in writing if my academic, financial, family or study-period status changes.
2. All information provided in connection with this application is subject to verification and audit by OCADU. I will provide supporting documentation to verify my eligibility upon request.
3. I understand that OCADU may disclose information on this form to the Ministry of Training, Colleges and Universities to verify and/or update information with respect to my OSAP application and/or this funding program.
4. Any funds I receive will be applied to my student account at OCADU.
5. Should I be selected to receive a Joubin-Selig OTSS Bursary, I consent to the disclosure to the donor of the award the following information: my name, program of study, year level and the amount of my award.

SIGNATURE

DATE