



July, 2011

## CANADIAN AMPUTEE GOLF ASSOCIATION (C.A.G.A.) ENTRANCE SCHOLARSHIP

Deadline: **31<sup>st</sup> August, 2012**

- Amount:** **Five - \$1,000.00 scholarships** (applied against tuition etc., in September) paid annually to approved applicants for a maximum of 2 years each. (Note: Any funds remaining after full tuition is paid, may be used for textbooks or rent - it will be the students' choice. All remaining funds will be administered directly from the institution)
- Eligibility:**
- 1) An *amputee* \_\_\_\_\_ *Yes* \_\_\_\_\_ *No* going on to any post secondary education. Must have completed graduation as per registered provincial criteria, and maintain a minimum 3.0 Grade Average during the term of their degree/diploma.
  - 2) An *able bodied person* \_\_\_\_\_ *Yes* \_\_\_\_\_ *No* who is pursuing the field of Prosthetics, is enrolled in a registered program and must maintain a minimum 3.0 Grade Average during the term of their degree/diploma.
- Selection Criteria:**
- a) Must be an amputee, or an able-bodied person pursuing the field of Prosthetics
  - b) Must be a Canadian citizen
  - c) Student must show demonstrated financial need
  - d) Charity involvement - within community
  - e) Preference will be given to an amputee, then an interested individual whose choice of a career, is in helping amputees in general
  - f) If accepted, must become a Lifetime member of CAGA and assist in the promotion of the Association, such as articles for the CAGA website, etc.
- Deadline:** All applications must be received by **31<sup>st</sup> August, 2011**  
Send completed bursary application to: **CAGA**  
**P.O. Box 6091 Stn A, Calgary Alberta. T2H 2L4**

**Read carefully** and complete all sections of the application. Failure to do so could result in disqualification of your application.

**The CAGA ENTRANCE SCHOLARSHIP is a non-repayable award given to a student who meets the above-noted criteria. Print in ink. Incomplete applications will not be considered:**

**SIN#:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

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

\_\_\_\_\_

Apt #	Street	City	Province	Postal Code	Telephone
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\_\_\_\_\_

Age	Marital Status	Number of Dependents
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**What educational institution will you be attending in the fall?** \_\_\_\_\_

**What program or discipline will you be studying?** \_\_\_\_\_

**To be considered for this award, students must meet the following:**

- a) **Student must demonstrate financial need.** Canada Student Loan packages are available from any College or University. Applications are available after May 15<sup>th</sup> and take approximately 8 - 12 weeks for processing.
- b) **Student must be able to demonstrate commitment to a Charity** (e.g. past, present and future - volunteering with Big Brothers & Sisters, is just one example).

**Note:** although it is not mandatory for students to first apply for Provincial Student Assistance, it is recommended that they do so. There is a limited number of bursaries available and preference will be given to students who, after having exhausted all other sources of financial assistance, are still in need.

**1. Will you apply for a Canada Student Loan for the upcoming academic year?**

Yes \_\_\_ No \_\_\_

If no, why not?

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**2. List all other types of financial assistance you have or will apply for:**

Name of organization and/or award	Date applied	Amount received

**3. Complete this question if you are under 18 and and/ or living at home.**

Parent's address (if different)

Street	City	Province	Postal Code
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No. of dependents at home: \_\_\_\_\_ ages: \_\_\_\_\_

Father's occupation: \_\_\_\_\_ annual income (gross) \_\_\_\_\_

Mother's occupation: \_\_\_\_\_ annual income (gross) \_\_\_\_\_

**4. While attending post-secondary studies,**

**I will rent:** ( ) a room ( ) an apartment ( ) house

**5. While attending post-secondary studies,**

**I will:** ( ) live with relatives ( ) be boarding ( ) live with roommate(s) ( ) live alone

**6. Do you own a motor vehicle:** ( ) yes ( ) no

If yes: answer the following:

DATE PURCHASED	YEAR	MAKE	MODEL	VALUE
_____	_____	_____	_____	_____
AMOUNT OWING	INSURANCE/YR			
_____	_____			

7. **Do you own assets such as home, real estate, stocks, and bonds, RRSP's etc.?**  
( ) yes ( ) no

Specify types of assets, current value and purchase date:

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8. **Will you be working during the summer months? If so, complete the following:**

Name of employer: \_\_\_\_\_

Average number of hours/week worked: \_\_\_\_\_

Average weekly take home pay \$ \_\_\_\_\_

How much money will you have saved by August 31 \_\_\_\_\_?

9. **Briefly describe your involvement in charitable and community activities. Use additional sheet if necessary.**

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10. **Educational goal:** \_\_\_\_\_

**Career goal (if known):** \_\_\_\_\_

11. **Provide any additional information concerning your financial circumstances, which you feel, will be helpful to the awards committee. Such information could improve your chances of obtaining this award.**

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**TRANSCRIPTS FROM YOUR LAST ATTENDED INSTITUTION MUST ACCOMPANY THIS APPLICATION.**

**Turn to next page.**

**12. Current educational year budget information must cover full educational costs for the current year.**

*If you are having difficulty completing this application, please contact a student aid from the school of your choice OR INSERT APPROPRIATE NAMES HERE*

**Single students:** show only *your* portion of expenses

**Married, Common Law, Single parent students:** show income and expenses of *entire* family

<u>TOTAL INCOME WHILE STUDYING</u>		<u>TOTAL EXPENSES WHILE STUDYING</u>	
SAVINGS AT BEGINNING OF EDUCATIONAL PERIOD	_____	TUITION FEES	_____
STUDENT LOAN/GRANT	_____	BOOKS/SUPPLIES	_____
SCHOLARSHIP (INCLUDING) PASSPORT TO EDUCATION	_____	RENT OR MORTGAGE (INCLUDING TAXES)	_____
BURSARIES	_____	FOOD	_____
APPLICANT'S PART-TIME INCOME INCLUDING WORK STUDY	_____	UTILITIES (HYDRO, GAS PHONE, CABLE)	_____
SPOUSES INCOME AFTER DEDUCTIONS	_____	INSURANCE (VEHICLE, LIFE, HOUSE)	_____
FAMILY ALLOWANCE	_____	LOAN PAYMENTS (VEHICLE CREDIT CARDS, ETC.)	_____
DAYCARE SUBSIDY	_____	TRANSPORTATION	_____
SOCIAL ASSISTANCE	_____	CHILD CARE	_____
CHILD SUPPORT	_____	CLOTHING	_____
EI OR HRDC ALLOWANCE	_____	MISCELLANEOUS (ENTERTAINMENT, HAIRCUTS CHRISTMAS, ETC.)	_____
PARENT/GUARDIAN CONTRIBUTION	_____	MEDICAL/DENTAL (PRESCRIPTIONS, GLASSES, ETC.)	_____
INCOME FROM ASSETS	_____	EXCEPTIONAL EXPENSES (SPECIFY)	_____
OTHER INCOME (SPECIFY)	_____	_____	_____
_____	_____	_____	_____
<b>TOTAL INCOME FOR EDUCATIONAL PERIOD</b>	_____	<b>TOTAL EXPENSES FOR EDUCATIONAL PERIOD</b>	_____
<b>TOTAL EXPENSES</b>	_____		
<b>MINUS TOTAL RESOURCES</b>	_____		
<b>EQUALS</b>		<b>NEED</b>	_____

How did you find out about the CAGA scholarship being available?

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**Thank you. Please ensure all applicable questions are completely filled out. Return this package to: CAGA, P.O. Box 6091 Stn A, Calgary AB. T2H 2L4**