



September, 2009

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

Deadline: 31st August, 2010

Amount: **\$5,000.00** tuition award (applied against tuition etc., in September)
(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 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 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 **31st August, 2010**
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	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 15th 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?

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

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:

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.**

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.**

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

TOTAL INCOME WHILE STUDYING

TOTAL EXPENSES WHILE STUDYING

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) _____

LOAN PAYMENTS (VEHICLE _____

FAMILY ALLOWANCE	_____	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 _____	_____	_____	_____
TOTAL INCOME FOR EDUCATIONAL PERIOD	_____	TOTAL EXPENSES FOR EDUCATIONAL PERIOD	_____
TOTAL EXPENSES		_____	
MINUS TOTAL RESOURCES	_____		
EQUALS		NEED	_____

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

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