



WECAR BURSARY AWARD

ELIGIBILITY:

1. Candidate must be the daughter or the son of a Broker/Sales Member of the Windsor-Essex County Association of REALTORS®.
2. Candidate must require financial assistance to continue his/her program.
3. Candidate must have made every effort to obtain assistance from other sources (eg. OSAP).
4. The Bursary/Scholarship Award can only be received once during their academic studies.
5. Candidate must be enrolled as a full time student at a UNIVERSITY OR COLLEGE LOCATED OUTSIDE OF WINDSOR, ONTARIO in the fall of the year of application.
6. Candidate must complete an application on the prescribed form and submit it to the office of the Windsor-Essex County Association of REALTORS® on or before the 31st day of July in the year of application.

APPLICANT'S LETTER:

The application will be null and void if not accompanied by a signed letter prepared by the applicant. The letter must contain the following: Information concerning prizes, scholarships, or awards won by the applicant in any endeavour; a short statement of the applicant's purposes in seeking to attend university/college and of his/her proposed program of study; a brief summary of the applicant's interests and specific participation in school, community, athletics, church, teams, etc.; and Information on financial need and family profile.

SELECTION CRITERIA:

1. Participation and achievement in the life and activities of the school, athletics and community;
2. Leadership qualities and assistance to others;
3. Scholastic Record;
4. Financial Need; and
5. Character and personal qualities.

REFERENCES:

Please include the names, addresses and phone numbers of three references. One reference should be a high school teacher, counselor or administrator. The others should be individuals in the community (not a teacher or relative) who knows you well. Particular importance will be attached to the information submitted by your references (see Selection Criteria above). Your references therefore should be selected with great care.



Value of \$1,000.00 awarded to a student who in the most recent year of studies reached an acceptable level of academic achievement and who has need for financial assistance in order to continue his or her educational program.



Social Insurance No. _____

WINDSOR-ESSEX COUNTY ASSOCIATION OF REALTORS®

BURSARY APPLICATION

(Surname) (First Name) (Student No.)

Date of Birth: _____ Son/Daughter of: _____
(Member's Name)

Local Address: _____ Phone: _____

(City) (Province) (Postal Code)

Email Address: _____

Institution Attending: _____

Program: _____

Major: _____ Year: _____

Institution Attended Last Year: _____

Accommodations (during school term): With parents _____ Other: _____

Do you own a motor vehicle? YES NO

If yes - Year: _____ Make/Model: _____ Present Value: \$ _____

Gross earnings from employment this past summer? \$ _____

Summer Savings? \$ _____

Other scholarships, assistantships, and bursaries you will receive this year:

Names and amounts: _____

If you have not applied for OSAP, please explain why. (If you have applied to another province, please indicate which one.)

| Resources | \$ | Expenses | \$ |
|--|----|---|----|
| Bank Balance (including savings from work-term) | | Tuition & Compulsory Fees | |
| Parental Contribution | | Books/Supplies/Instruments | |
| Spouse's Net Income \$ _____ x _____ months | | Transportation: LOCAL - HOME - | |
| Academic Awards | | Rent \$ _____ x _____ months | |
| Total OSAP | | Utilities \$ _____ x _____ months | |
| Net Part-Time Earnings | | Phone \$ _____ x _____ months | |
| Government Income (Orphan's Benefit, Welfare, Family Benefits, etc) | | Other Educational Expenses (Specify & Attach Receipts) | |
| Support Payments from Ex-Spouse | | University Residence Meal Plan | |
| Support Payments from Non-Custodial Parent | | Clothing | |
| Investment Income | | Food \$ _____ x _____ months | |
| | | Personal Hygiene \$ _____ x _____ mths | |
| | | Entertainment \$ _____ x _____ mths | |
| Total Resources: | | Total Educational Expenses: | |
| Financial Need (Resources – Expenses) | | \$ | |

Are there special circumstances, which lead you to require bursary assistance or any other information you wish to add in support of this application. (Attach extra sheet if necessary).

I give my permission to WECAR to release a copy of my bursary application and/or supporting details of my academic and financial situation to outside donors for adjudication (if appropriate to the terms of reference for the award) when funds are donated from outside the University. I permit the donor to make public my name and the particulars of the award bestowed.

Signature of Applicant: _____ Date: _____

Krista Del Gatto

Krista Del Gatto, CAE, CRAE, Executive Officer
Windsor-Essex County Association of REALTORS®

Revised: May 2016