



**Westshore Community Foundation  
Mature Student  
Scholarship Application Form**

Please do not forward the Application Guidelines with your Application Package. Be sure that the information you provide on the Application Form is up to date, accurate, and complete.

**PERSONAL AND CONTACT INFORMATION**

Family Name

Given Names

D.O.B d/m/y

**Address while in school:**

Box Number/Street Address

City/Town

Province/Territory

Postal Code

Telephone

**Permanent /Home Mailing Address for the last two years**

Box Number/Street Address

City/Town

Province/Territory

Postal Code

Telephone

**Address you would like us to use:**

School

Permanent

E-mail Address

**EDUCATION**

Identify institution you have been accepted into

Admission confirmed?

Yes  No

\_\_\_\_\_

What year of study are you entering?

1  2  3  4  5

\_\_\_\_\_

Length of program (in years)?

1  2  3  4  5

Degree/Diploma or other, e.g. Red Seal program at Graduation

Year you will complete your program?

\_\_\_\_\_

Start Date (d/m/y)    Finish Date for this year?    What job/career/occupation do you hope to have when you graduate?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List the last school, college, trade school, or university that you have attended.

From (d/m/y)	To (d//y)	Name of institution	Program	Degree/Diploma Granted
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Presently attending any recognized Post - secondary Education Program (i.e. includes Universities, Colleges, and Trades Facilities).

\_\_\_\_\_

Program of Study for which you have been accepted.

\_\_\_\_\_

## INVOLVEMENT

Write a letter that describes the following:

1. Your educational and future goals
2. Your community/ volunteer activities
3. Please share why you feel you are a good candidate for our scholarship/bursary.  
(no more than 200 words)

## DETERMINING FINANCIAL NEED

Please share what challenges you fore see in your pursuing further education.

(E.g. Travel costs, relocation, etc.)

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Employment:

- Currently working:

Full time  
  Part time  
  Occasionally  
  Not working

While in school I will work part time

Yes  
  No  
  Unsure

What other Scholarships/bursaries have you applied for or received for the upcoming academic year?

- Name of award Amount Confirmed

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- Have you applied for Government and/ or Financial assistance for the upcoming academic year?

Yes  No  Explain

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**Financial Requirements**

- Tuition and Registration

Cost \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Board and Room

Cost \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Travel and other subsidiary

costs \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DECLARATION AND CONSENT**

- I have read and fully understand the guidelines that govern the application and selection process. I have provided answers to all the questions which apply to me.
- I certify that all information contained on this form is truthful.
- I understand that any false statements intentionally given on this application, by email, or telephone will disqualify my application and will affect my ability to access future funding.
- I hereby give consent for the WCF to use/publish my name and relevant information on WCF's website, in WCF's brochure, in the local newspaper, or in our donor communication for promotion and marketing.
- I will endeavour to attend the Award ceremony if selected.

Applicant's signature: \_\_\_\_\_

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