



City of Toronto Scholarships for Aboriginal Students Studying in Health Professions

Scholarships will be awarded to aboriginal students studying in any of the health professional programs, undergraduate or graduate, on the basis of financial need, academic merit and demonstrated leadership skills. This program is restricted to Canadian citizens or permanent residents of Canada who are residents of Ontario.

It is essential that you complete all four pages of this application. All decisions are based solely on the information and documentation you have provided. Insufficient information and / or documentation may result in your application not being approved by the grant committee.

Deadline for submission of completes application and supporting documents is: end of October annually.

Additional information

- * Attach a separate sheet of paper describing your community involvement
- * Provide two letters of reference from individuals in the community or academic life who can attest to your community involvement and leadership ability.

PLEASE COMPLETE IN FULL

Aboriginal and treaty rights of the Aboriginal peoples of Canada are recognized and affirmed in the Constitution Act of 1867 and 1982 (section 35). Section 35 (2) indicates Aboriginal peoples include First Nation, Inuit and Métis peoples.

I confirm that I am an Aboriginal student Yes No

Personal Information

Marital Status <input type="radio"/> Single <input type="radio"/> Other <input type="radio"/> Married		Status in Canada <input type="radio"/> Canadian Citizen <input type="radio"/> Student Authorization <input type="radio"/> Permanent Resident <input type="radio"/> Other	
Number of dependent children living with you		Ages of dependent children living with you	
Last Name/Surname		First Name/Given Name	
Faculty/College	Student Number	Year of Study	Credits in current academic year
Expected Date of Graduation (mm/yyyy)	Program/Area of Study		

Full Mailing Address

Street Name and Number		Apt #
City	Province	Telephone
Country	Postal Code	
E-mail Address:		

References - provide the name and telephone number of two individuals who will be providing letters of reference

Name	Telephone
Name	Telephone

Government Assistance (OSAP, Canada Student Loan, or other government assistance)

Have you applied for assistance for the current academic year? Yes No

Have you appealed your OSAP/ government award? Yes No

Family Information

Gross annual income

Number of Dependents in family _____ Number attending University/College _____

If there are special circumstances that limit the support provided by your family, please provide details in your "Personal Statement".

Motor Vehicle

Do you own or lease a motor vehicle? Yes No

If yes, please indicate model and year and explain its necessity in your "Personal Statement". _____

Employment / Other Income

Summer

Gross Summer Earnings _____

If you were not employed, or were unable to save a reasonable portion of your earnings, please provide details in your "Personal Statement".

School Year	Amount	Source	
		U of T	Other
Scholarship, Fellowship, etc	_____	<input type="checkbox"/>	<input type="checkbox"/>
Grant, Bursary	_____	<input type="checkbox"/>	<input type="checkbox"/>
Teaching / Research Assistantship	_____	<input type="checkbox"/>	<input type="checkbox"/>
Total	_____		

Are you working part-time during the current academic year? Yes No

If not, have you investigated the possibility of part-time employment with the Work-Study Program? Yes No

If no, please explain in your "Personal Statement".

Budget Outline

Please provide the following budget for the eight month period from **September to April** of the current academic year:

Married students should indicate their total family income (after tax and other compulsory deductions) and total family expenses.

Estimated Expenses	
Expense Type	Amount \$
Tuition	
Books	
University Residence	
Rent _____ Per Month	
Utilities _____ Per Month	
Groceries _____ Per Month	
Transportation	
Toiletries / personal care	
Childcare	
Telephone / internet	
Other (specify) _____	
Other (specify) _____	
Total Expenses	

Financial Resources/Income	
Income Source	Amount \$
Bank Balance at the beginning of the academic year prior to paying tuition and residence fees	
Net Income from part-time work / Work-Study	
Spouse's Income (net)	
OSAP or other government student aid	
Child tax credit / GST rebate / orphan's benefits	
Parental support / RESP/ support payments	
Grants / Scholarships / Fellowships / TA / RA	
Assets which can be liquidated	
Other income not declared above (specify) _____	
Total Income	

Based on the information provided above your calculated financial need is:

_____	-	_____	=	_____
Total Income		Total Expenses		Total Need

If Total Income > Total Expenses, Total Need = 0

Personal Statement - Provide details to questions from page two of your application in the space provided here. You may also attach a letter.

Students who rely on funding programs such as OSAP, UTAPS or other sources of financial aid must budget realistically in order to meet their educational costs. A financial plan provides an opportunity to evaluate progress and make sound decisions. Please explain how you planned to finance your studies at the beginning of this school year, what happened to change or affect your budget and why you now require assistance.

Students who have unusual or high expenses should explain in detail why these expenses are necessary and how they planned to cover the costs. Please provide documentation to confirm these expenses.

Declaration

I am requesting University grant assistance in the amount of _____

I hereby certify that the information provided on this application is, to the best of my knowledge, true and complete, and I authorize the release of the information contained herein to the appropriate Grant Selection Committee.

Some grants are funded by private donors who wish to receive limited information about the recipient(s). This could be general, biographical and/or academic in nature.

Do you agree to the release of such information? Yes No

(Students who indicate "no" will be considered for grants from other sources).

The University of Toronto respects your privacy. The information on this form is collected pursuant to section 2 (14) of the University of Toronto Act, 1971. It is collected for the purpose of administering admission, registration, academic programs, university-related student activities, activities of student societies, financial assistance and awards, graduation and university advancement, and for the purpose of statistical reporting to government agencies. At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act. If you have questions, please refer to www.utoronto.ca/privacy or contact the University's Freedom of Information and Protection of Privacy Office at 416 946-5835, Room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, ON, M5S 1A1

Signature

Date (dd/mm/yyyy)

Retain a copy of this application for your records.