PROMOTING ACTIVE HEALTHY COMMUNITIES
BRAEFOOT COMMUNITY ASSOCIATION

PHONE
250-721-2244

ADDRESS
1440 Harrop Rd, Victoria, BC V8P 2S6

EMAIL
admin@braefoot.ca

WEBSITE
www.braefoot.ca

Student Bursary Application

Closing Date: October 31st, 2026

Our Board of Directors

Chair
Sean Nacey

Directors
Ryan Painter
Dave Cutler
Cyrus Kanga
Cameron Parks
Lee Richardson
Jason Willow

Dear Applicant;

Enclosed is an application form for the Braefoot Community Association Student Bursary/Scholarship. Please take the time to read this letter and apply if you are eligible.

These are annual bursaries that are to be awarded to a student(s) attending any accredited post-secondary educational institution in Canada on a full-time basis. Eligible candidates must demonstrate a connection with the Greater Victoria community - for example, they were raised in the Victoria area or attended high school in the Victoria area.

The Braefoot Community Association will adjudicate all applications and will select the winner(s) after considering the applicants' credentials as defined below:

1. Evidence of academic achievement that qualifies the applicant for entrance into a recognized post-secondary institution.
2. Evidence of financial need
3. Evidence of being a positive role model for youth (ie. coaching, instruction, big brothers/ sisters)
4. Evidence of interests/hobbies, volunteer and other community activities.

All students at any point in their post-secondary studies are invited to apply. Bursaries/Scholarships are presented at our annual Friends of Braefoot dinner in October.

Sincerely,

The Board of Directors,
Braefoot Community Association

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Please Print and Complete All Answers

1. STUDENT INFORMATION

NAME: _____

PERMANENT ADDRESS: Street _____

City _____Prov _____Postal Code _____

MAILING ADDRESS (if different from #2): Street _____

City _____Prov _____Postal Code _____

PHONE NUMBER(s): HOME _____OTHER _____

E-MAIL: _____

BIRTH DATE: DAY _____ MONTH _____ YEAR _____

SIN # _____

PARENT NAME: _____ OCCUPATION:_____

PARENT NAME: _____ OCCUPATION:_____

2. EDUCATION INFORMATION

NAME AND ADDRESS OF SCHOOL(s) ATTENDED IN THE LAST 3 YEARS:

Name of School	Address

IF NOT INCLUDED ABOVE, WHAT HIGH SCHOOL DID YOU GRADUATE FROM?

_____

SCHOLASTIC RECORD FOR THE LAST 2 YEARS:

Name of Institute	Grade Average	Dates Attended

SCHOOL YOU PLAN TO ATTEND _____

Street _____City _____

Prov/State _____Country _____ Postal/Zip Code _____

STUDENT NUMBER: _____

PROGRAM _____

FULL-TIME PART-TIME

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INTENDED FIELD OF STUDY: _____

_____

LIST OF HONOURS, AWARDS, OR SCHOLARSHIPS YOU HAVE RECEIVED:

_____

_____

_____

_____

LIST TWO NAMES WHICH MAY BE CONTACTED AS ACADEMIC REFERENCES:

(Both must be drawn from academic sources familiar with your studies)

Name	**Phone**
Institution	**Title**
Name	**Phone**
Institution	**Title**

PLEASE SEND COPIES OF THE FOLLOWING:

1. Your last year's official record of marks (all courses).
2. Two letters of reference.
3. Financial information

EMPLOYMENT RECORD FOR THE LAST 2 YEARS, INCLUDING SUMMER AND PART-TIME WORK:

Employer	Address	Year	Occupation	Supervisor

GIVE DETAILS OF ANY FINANCIAL ASSISTANCE FOR THE COMING YEAR FOR WHICH YOU INTEND TO APPLY (E.G., Loans, Scholarships, etc.):

Type	Source	Amount

ARE YOU RECEIVING MONTHLY INCOME? (I.E., Part-time wages, work-study or other) Y N

If yes, how much do you receive per month? _____

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DO YOU AND/OR YOUR SPOUSE OWN OR LEASE A MOTOR VEHICLE(S)? Y N

If yes, what is the estimated resale value? _____

DO YOU OWN ANY OTHER ASSETS SUCH AS RRSPS, GICS, TERM DEPOSITS, ETC? Y N

If yes, what is the total value of those assets?_____

DO YOU HAVE ANY SAVINGS? Y N

If yes, how much are your savings? _____

ARE YOU PAYING RENT, MORTGAGE, OR ROOM AND BOARD? Y N

If yes, how much do you pay per month? _____

_____

ARE YOU PAYING DAYCARE COSTS THAT ARE NOT SUBSIDIZED? Y N

If yes, how much do you pay per month? _____

ANY OTHER FINANCIAL CIRCUMSTANCES THAT YOU FEEL NEED TO BE CONSIDERED:

_____

_____

_____

_____

3. BURSARY INFORMATION

PLEASE DESCRIBE HOW YOU HAVE SERVED AS A POSITIVE ROLE MODEL FOR YOUTH:

_____

_____

_____

_____

PLEASE DESCRIBE YOUR INTERESTS AND HOBBIES, VOLUNTEER AND OTHER COMMUNITY ACTIVITIES. WHAT ARE YOUR PLANS FOR THE FUTURE?

_____

_____

_____

_____

WHY ARE YOU APPLYING FOR THIS BURSARY AND HOW WILL RECEIVING THE BURSARY MAKE A DIFFERENCE TO YOU?

_____

_____

_____

_____

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4. CONDITIONS AND DECLARATION OF APPLICANT

Please enter a checkmark in the boxes beside each statement as your acknowledgment of each condition:

☐ I WILL NOTIFY THE BRAEFOOT COMMUNITY ASSOCIATION IF THE INFORMATION I HAVE GIVEN ON THIS FORM CHANGES IN ANY WAY. SOME OF THE CHANGES I AM REQUIRED TO LET THEM KNOW ABOUT ARE:

- Change in my address and/or phone number;
- Change in the amount of money I have for my education from a student loan, work, parent(s) or other relative(s), other income;
- Change in marital status or family; and
- Change in educational situation, i.e., drop class(es), do not maintain passing grades, take longer to finish courses.

☐ I GIVE PERMISSION TO THE BRAEFOOT COMMUNITY ASSOCIATION TO CHECK INFORMATION ON MY BURSARY APPLICATION AND TO DISCUSS WITH GOVERNMENT STUDENT LOAN STAFF ANY INFORMATION ON MY STUDENT LOAN APPLICATION.

☐ I AM REQUIRED TO HAVE A VALID SOCIAL INSURANCE NUMBER TO BE ELIGIBLE FOR THIS PROGRAM.

☐ IF I AM RECEIVING INCOME ASSISTANCE OR STUDENT LOAN/GRANT ASSISTANCE, I AM REQUIRED TO NOTIFY THEIR OFFICE OF ANY BURSARY OR BURSARIES I RECEIVE.

Why we ask these questions:

We ask for this information in order to give bursaries in the fairest way possible to students who meet the bursary guidelines. The information you give on your application may be checked with information given on your student loan application. As well, your registration, enrollment, class attendance/progress and grade-point average may be checked with registration records, faculty, and staff, in order to verify your eligibility for financial assistance. If you have any questions about how this information is used, please contact The Braefoot Community Association.

DECLARATION OF APPLICANT

"I _____

do solemnly declare:

A) That to the best of my knowledge and belief the required information supplied is complete and accurate in every respect;

AND

B) That any monies issued on the basis of this application will be used only for valid educational tuition associated with my studies."

SIGNED_____DATE_____