



HARRISON MCCAIN SCHOLARSHIP/BURSARY APPLICATION FORM

The Harrison McCain Scholarships/Bursaries are available annually to entering students attending University who have graduated from a high school in Canada. Each award has a program value of \$16,000 payable over a four year course of study in the amount of \$4,000 per year. Criteria for the awards include a minimum 80% average in senior year of high school, financial need, leadership qualities, and a recognized initiative in funding your own education. The number of scholarships/bursaries available may vary from year to year. Renewal criteria to be met each year.

Deadline for applications: **March 1, 2021**

Section A: To Be Completed By Applicant

Name: _____

Student Number (if known): _____

Mailing Address: _____

High School: _____

Will you be applying for a Canada Student Loan/Provincial Student Loan for the upcoming academic year? ☐ Yes ☐ No

Do you anticipate having any paid employment over the summer? If so, please state expected occupation and estimated gross earnings. ☐ Yes ☐ No

What are your estimated resources for the upcoming academic year?

- | | |
|---|----------|
| 1. Savings from summer employment | \$ _____ |
| 2. Tuition Waiver | \$ _____ |
| 3. Parents/parent contribution | \$ _____ |
| 4. Scholarships/bursaries (do not include this award) | \$ _____ |
| 5. Part-time work | \$ _____ |
| 6. Education/University trust fund | \$ _____ |
| 7. Savings other than #1 above | \$ _____ |
| 8. Investments | \$ _____ |
| 9. Canada Pension Benefits | \$ _____ |
| 10. Other (state resources) | \$ _____ |

Where are you planning on living during the academic year?

In residence ☐ In a room or apartment off campus ☐ With Parent/Parents ☐



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Please attach two (2) letters of recommendation, your own letter and personal essay, as follows:

- On official letterhead, one letter from your Principal, Teacher or Counsellor with their telephone number
- One letter from an employer, volunteer organization or an individual (non-family) who has known you for at least two (2) years, with his/her telephone number
- Write and tell us what an award of this scholarship/bursary would mean to you. One page limit please.
- Attach a personal essay outlining your extra-curricular, leadership, financial need, work experience and career plans. Two page limit please.

Section B: To Be Completed By Parent(s)/Guardian(s)

Marital Status of Parent (s)/Guardian(s)

☐ Married ☐ Separated/Divorced ☐ Single/Widowed ☐ Common-Law

If the applicant's parents are separated/divorced, please provide the information and signature (on page 3) for the parent/stepparent who has custody of the applicant. If neither parent has custody, please provide the information and signature for the parent/stepparent with whom the applicant resides.

Occupation and yearly income of parents:

Father/Stepfather/Guardian: Occupation _____ Yearly gross income \$ _____

Mother/Stepmother/Guardian: Occupation _____ Yearly gross income \$ _____

List names, ages, and relationship of individuals who are dependent on you, including applicant:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

How many of the dependents listed above will be attending a post-secondary institution on a full time basis during the upcoming academic year? _____



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Section C: Declaration & Consent by Applicant and Parents/Guardian

I declare that to the best of my knowledge, the information provided is correct.

I consent to the release of the information in this application, including high school transcripts on file, to the Harrison McCain Foundation for the sole purpose of determining the recipients of the scholarships/bursaries.

DATE _____ SIGNATURE OF APPLICANT _____

DATE _____ SIGNATURE OF MOTHER/STEPMOTHER/GUARDIAN _____

DATE _____ SIGNATURE OF FATHER/STEPFATHER/GUARDIAN _____

Reminder to applicant:

Please attach two (2) letters of recommendation, your own letter and personal essay

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