

ADVANCING FUTURES BURSARY Returning Student APPLICATION

This application should be filled out by students who have been continuously enrolled with *Advancing Futures*. Students who have withdrawn or taken a leave of absence (6 months or more) must fill out the new student application form.

NOTE: Applications for ALL terms (Fall, Winter, Spring and Summer) must be received on or before June 1.

Before applying for funding you must have submitted an application to attend an educational institution.

Please Note: *Advancing Futures* applications take 6 – 8 weeks to process. All sections of this application form must be completed before it can be reviewed. Applications received AFTER June 1 will NOT be eligible for funding. Incomplete applications will be returned and not processed.

Completed application forms can be:

1. faxed to (780) 644-6905 or

2. mailed to:

Advancing Futures bursary program

10 Floor, Sterling Place

9940 – 106 Street

Edmonton, Alberta T5K 2N2

If you have questions about the *Advancing Futures* bursary program or this application form you can:

1. call (780) 415-0085 (for long distance first dial 310-0000)

2. e-mail advancing.futures@gov.ab.ca or

3. visit www.advancingfutures.gov.ab.ca.

A sample of a completed application form is located at

www.advancingfutures.gov.ab.ca.

The personal information collected on this form will be used to review your eligibility for the *Advancing Futures* bursary.

PERSONAL INFORMATION (MANDATORY)

LAST NAME:

FIRST NAME:

ADDRESS (including apartment number):

CITY:

PROVINCE: POSTAL CODE:

HOME PHONE NUMBER:

CELL PHONE NUMBER:

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E-MAIL

BIRTH DATE (MM/DD/YY):

GENDER:

Male

Female

SOCIAL INSURANCE NUMBER

(*REQUIRED):

HAVE YOU RECEIVED PREVIOUS ADVANCING FUTURES

FUNDING?

Yes

No

*** If you checked "NO" please fill out the NEW Student Application.**

NOTE: If you change your personal information, such as your address, phone number or e-mail during the bursary year you must contact the *Advancing Futures* bursary program IMMEDIATELY!

DEPENDANT CHILDREN

Complete for all of your dependant children **living** with you.

LAST NAME:

FIRST NAME:

BIRTHDATE
(MM/DD/YY):

LAST NAME:

FIRST NAME:

BIRTHDATE:

LAST NAME:

FIRST NAME:

BIRTHDATE:

FEEES FOR CHILD CARE:

If you require child care, you must submit a Child Care Confirmation form. Forms are located at

www.advancingfutures.gov.ab.ca.

EDUCATIONAL INFORMATION

Please include a copy of your confirmation of enrollment, conditional acceptance or acceptance from your school (confirmation should include tuition costs, as well as the courses you are enrolled in). If you are unable to include a copy of your confirmation of enrollment with this application you must contact *Advancing Futures* or your application will be returned.

TERM(S) APPLYING FOR:

Fall

Winter

Spring

Summer

PROGRAM TYPE:

Upgrading

Certificate

Diploma

Degree

SCHOOL NAME (include Campus Name):

PROGRAM OF STUDY:

TERM START (MM/DD/YY):

TERM END (MM/DD/YY):

YEAR OF PROGRAM: First

Second

Third

Fourth

LENGTH OF PROGRAM: _____

Weeks

Months

Years

ESTIMATED GRADUATION DATE (MM/YY):

PROGRAM STATUS WITH SCHOOL:

Applied

Conditionally Accepted

Accepted

ENROLLMENT STATUS:

STUDENT ID NUMBER:

Full-time

Part-time

FEEES FOR TUITION

(including mandatory charges):

FEEES FOR MANDATORY

BOOKS:

FEES FOR MANDATORY SUPPLIES (include a list of all MANDATORY supplies and for what courses.)

FEES FOR ON CAMPUS RESIDENCE (include number of months in Residence.)

NOTE: Proof of your tuition and mandatory book and supply fees must be provided. Please submit a letter from your school or a copy/print out of your student account or confirmation from the school's website as confirmation. **If you do not have this information when applying, please attach a letter indicating when you will forward the missing information to Advancing Futures.**

MONTHLY LIVING ALLOWANCE INFORMATION

Recipients will be funded a fixed monthly living allowance based on double occupancy. If you have special circumstances that require extra monthly funding, please submit a letter outlining your needs.

ADDITIONAL INCOME

Have you applied for, or are you receiving, other sources of financial assistance?

Financial assistance includes loans and subsidies through sources including, but not limited to, Alberta Works, Assured Income for the Severely Handicapped (AISH), Persons with Developmental Disabilities (PDD), Employment Insurance (EI), Supports for Independence (SFI), Student Finance or Child and Family Services Authorities.

- No, I do not currently receive additional sources of funding.
- Yes, I currently receive additional sources of funding and I have included the details below.

PLEASE LIST WHAT TYPE(S) OF FINANCIAL ASSISTANCE YOU ARE RECEIVING (example: loan, bursary, scholarship, assistance):

WHAT GOVERNMENT AGENCY OR ORGANIZATION DO YOU RECEIVE THE FUNDING FROM? (Example: AISH, EI SIL, Income Support)

HOW MUCH FUNDING DO YOU RECEIVE PER MONTH:

PAYMENT TYPE: (Example: Cash, Direct Deposit)

NAME/PHONE NUMBER OF THE CASEWORKER OR ORGANIZATION YOU RECEIVE FUNDING FROM:

Name:

Phone Number: ()

STATUS OF FUNDING:	PAYMENT START DATE
<input type="radio"/> Applied for	(MM/DD/YY)*:
<input type="radio"/> Currently Receiving	
<input type="radio"/> Approved	PAYMENT END DATE
	(MM/DD/YY)*:

*Should there be an overlap on the dates that you receive assistance and your school term start and end date, Advancing Futures requires a letter from the department or agency providing you with such assistance. This letter must indicate the end date of their services, including the month in which you will receive your final payment.

PLEASE NOTE: *If you are accepted for the Advancing Futures bursary, it is recommended that you inform any others from whom you are receiving financial assistance. It can be unlawful to receive multiple sources of funding. In order to avoid any potential offenses as a result of receiving additional assistance from this bursary, please ensure this section is completed accurately. False information may result in the loss of the Advancing Futures bursary.*

LEARNING DISABILITIES*

Have you ever been diagnosed with a leaning disability?

- Yes
- No
- I don't recall.

If you checked off YES, what type of learning disability were you diagnosed with?

When was your last assessment completed?

Are you currently receiving support from your institution with your learning disability? YES NO

*The information you provide regarding your learning disability will not affect your bursary funding. The information will be used to link you with supports you may need to access through your institution to be successful.

WHAT TO INCLUDE IN YOUR APPLICATION

You must complete and include the following information and documents. The Advancing Futures bursary program will NOT review incomplete applications.

- Completed application form (please make sure it is signed)
- Copy of transcripts
- Proof of registration or enrollment from your school
- Confirmation of your tuition and mandatory books
- Mandatory supplies list (if applicable)
- Child Care form (if applicable)
- Letter from department or agency providing you with financial assistance (if applicable)

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DECLARATION AND CONSENT Please read and sign: The information that I have provided in this application is true, accurate and complete. I am aware that providing incomplete or false information can be considered fraud and will affect my ability to access future funding and may also result in criminal charges. I authorize Alberta Children and Youth Services, other government departments and the school I am or will be attending to share my student information and information in relation to additional sources of funding I am receiving, for the purpose of determining and verifying eligibility for, and general administration of the award for which I have applied. I authorize Advancing Futures to contact my reference and other support systems if needed. Information will only be used for management of the Advancing Futures award. **I understand bursary payments received from Advancing Futures may be taxable. For more information contact Revenue Canada at 1-800-959-8281.**

SIGNATURE:

PRINT NAME:

DATE (MM/DD/YY):

The collection of personal information on this form is authorized under section 8(1) of the Government Organization Act and is managed in compliance with the Freedom of Information and Protection of Privacy Act. Any questions regarding the collection and use of your personal information can be addressed to Community Partnerships and Youth Strategies Branch, Children and Youth Services.

