



# Kin Canada

---

## Bridgewater & Area Kinsmen

### **Kinsmen – Serving the Community’s Greatest Needs**

**Bridgewater and Area Kinsman** established a bursary to promote, encourage and sponsor educational programs and activities, by providing assistance to applicants in their quest for higher learning at a recognized postsecondary institution.

**ELIGIBILITY** To be eligible you must:

1. Be a Canadian citizen or landed immigrant.
2. Plan to register as a full-time student in the 2017-2018 school year at a recognized post-secondary institution.
3. MAIL this application to only one of a local Kinsmen or Kin Club nearest your permanent residence. (Bridgewater and Area Kinsmen, 450 LaHave St, Unit 17, Suite 134, Bridgewater, NS, B4V 3T2)
4. Demonstrate high ideals and knowledge of kin
5. Not have previously received a bursary from the Bridgewater and Area Kinsmen.

### **APPLICATION PROCEDURE CHECKLIST:**

- Complete the current application form and **MAIL TO YOUR NEAREST LOCAL KINSMEN, OR KIN CLUB BY MARCH 1<sup>ST</sup>**
- **Proof of Citizenship** (Canadian birth certificate, passport, certificate of citizenship, or Canadian Immigration Record) will be required from bursary award winners and will be obtained prior to funds being released.
- **You MUST fully complete every section. Do not submit resumes or references.**

### **NOTES:**

- The responsibility for the completed application form rests with the applicant; be sure to answer ALL questions.
- Any information provided may be subject to authentication.
- All information on the application form will be held in the strictest confidence.

**PERSONAL INFORMATION**

Last Name \_\_\_\_\_ First Name and Middle Initial \_\_\_\_\_

---

Permanent Address \_\_\_\_\_ City or Town \_\_\_\_\_ Province Postal Code \_\_\_\_\_

---

Phone Number \_\_\_\_\_ Applicant E-mail address \_\_\_\_\_ Parent/Guardian Email Address \_\_\_\_\_

---

Date of birth (mm/dd/yyyy) \_\_\_\_\_ Citizenship Status: \_\_\_\_\_ Preferred Language: \_\_\_\_\_  
 Canadian Citizen\_\_ Landed Immigrant\_\_ English\_\_ French\_\_

**PROPOSED PROGRAM OF STUDY**

Name of Institution \_\_\_\_\_ Location (City, Province) \_\_\_\_\_

---

Expected Starting Date \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_ Diploma / Degree Expected \_\_\_\_\_  
 (mm/dd/yyyy) (mm/dd/yyyy)

---

Program/Area of Study \_\_\_\_\_

**EDUCATIONAL HISTORY**

Most recent school or institution \_\_\_\_\_ Grade / Program \_\_\_\_\_ Finish Date \_\_\_\_\_ Certificate/Diploma/Degree Completed \_\_\_\_\_

**FINANCIAL INFORMATION**

- All fields MUST BE COMPLETED or the application will NOT be considered (max. 38 points)

1. Applicant Net Income\* for 2015: \_\_\_\_\_ Applicant Net Worth (including RESPs)\*\*: \_\_\_\_\_
2. Where will you be living while in school?\_\_ On Own (House/Apartment) \_\_Residence \_\_Room & Board  
 \_\_With Parents/Legal Guardians \_\_Shared Accommodations (# of roommates \_\_ )\_\_ Other (describe): \_\_\_\_\_
3. Please list your estimated expenses for the upcoming academic year (12 months):

1.	Tuition/Incidental Fees:		Books/Supplies:		Total Line 1:		TOTAL:
2.	Housing/Accommodation:		Transportation:		Total Line 2:		

4. Have you been out of school 4 or more years? \_\_\_ (Y/N) Have you been in the work force FULL TIME for 2 consecutive years? \_\_\_ (Y/N)

**If you answered Yes to either question in #4 above, skip question #5 and #6 and go to question #7.**

5. Parents Combined Net Income\* for 2015 \_\_\_\_\_ Parents Combined Current Net Worth\*\*: \_\_\_\_\_
6. Amount held by family members in RESPs (Registered Education Savings Plan) \_\_\_\_\_ # of Parents: \_\_\_\_\_  
 # of Dependents living at home: \_\_\_\_\_ Including you, total # of children in post-secondary school: \_\_\_\_\_
7. Do you have children? \_\_Yes \_\_ No If yes, how many? \_\_\_\_\_
8. Are you married (or living common-law)? \_\_Yes \_\_No

**If you answered No to question #8, skip question #9 and go to the next page.**

9. Spouse's Net Income\* for 2015 \_\_\_\_\_ Spouse's Current Net Worth\*\* \_\_\_\_\_

\* Net Income as reported to Revenue Canada

\*\* Net Worth = total value of assets (cash, houses, vehicles, investments, etc.) LESS total value of liabilities (mortgage, loans, etc)



KIN KNOWLEDGE (max. 20 points) 1) Explain your knowledge of Kin Canada and your local/nearby Kinsmen, Kinette or Kin clubs. Give specific examples.

Kin Canada:

Local Club:

2) Describe your experience with Kinsmen / Kinette / Kin Clubs

3) Are you a Kin Member?  Yes  No List any relationships with Kinsmen and/or Kinettes (past or present).

**Additional Points may be added based on Overall Quality of Application. Please use this space to add any Additional information related to this Application that you feel is important for consideration by the committee. (max. 10 points)**

**Are you interested in learning more about Kin Canada?  Yes  No**

**PRIVACY STATEMENT AND APPLICATION AGREEMENT**

Personal information under the control of Kin Canada (further known as the Association) and the Hal Rogers Endowment Fund shall remain confidential and shall not, without the consent of the individual to whom it relates, be used by the Association except: (a) for the purpose for which the information was obtained or compiled by the Association; or (b) for a use consistent with that purpose. By completing and authorizing this Application, you consent to the use of your personal information for: (a) processing of the application; (b) publication of name in the Association's Magazine and Brochure; (c) publication of name in the media; and/or (d) promotional purposes. You also consent to the use of your email address by the association, for the purpose of communication.

I hereby certify that all information is accurate and can be verified upon request, can prove Canadian citizenship; **and that I have not been a recipient of this bursary previously.**

**Signature of Applicant** \_\_\_\_\_

**Date of**

**Application** \_\_\_\_\_

(Or parent/guardian if applicant is not age of majority)