

Lisa Huus Bursary application for first-time applicants

Please visit https://islandkidsfirst.com/lisa-huus-bursary/ for more information on the story behind the Lisa Huus Bursary, eligibility requirements, and the application process. Additionally, you can email bursaries@islandkidsfirst.com or call 250-940-4950 to speak to one of our staff members should you have questions throughout the application process.

Application requirements

- Application form
- Proof of permanent residency (only for applicants who are not Canadian citizens)
- Letter of disability certification
- Reference letters (three)
- Official academic transcript(s)

The deadline for applications is **May 31**. All application materials listed above must be received by this date.

Please send all required supplementary materials to:

Lisa Huus Memorial Fund C/O: Children's Health Foundation of Vancouver Island 345 Wale Road Victoria BC V9B 6X2

Note: Original copies of supplementary materials are required by mail. However, scanned copies can be sent via email (<u>bursaries@islandkidsfirst.com</u>) to ensure you meet the deadline of May 31.

SECTION A: Applicant information

SECTION A: Applicant information
First name:
Last name:
Date of birth:

Address:
Town/city:
Province:
Postal code:
Phone number:
Email address:
I am a Canadian citizen Yes No
I am a permanent resident of Canada Yes No
*Please choose 'no' if you are a Canadian citizen.

I am a permanent resident and will provide proof of permanent residency before May 31 (mail to Children's Health Foundation of Vancouver Island or email a copy to bursaries@islandkidsfirst.com)

I agree

Does not apply (check this if you are a Canadian citizen)

Which accredited post-secondary institution in British Columbia will you be attending in the upcoming school year? (Please include your student number if known)

SECTION B: Letter of disability certification

You must provide a signed letter from a medical professional.

This letter should include:

- The professional's name, title, phone number and address, official stamp or letterhead and signature;
- The date of the assessment;
- A statement of the nature of the disability;
- An explanation of the functional impact of the disability on your education; and

• Recommendations for any specific accommodations that will assist in the pursuit of a post-secondary education.

Please note that a medical professional may charge a fee to prepare this letter. The application is not considered complete until this letter has been received.

I will send the letter of disability to Children's Health Foundation of Vancouver Island (345 Wale Rd.) before May 31.

Yes

[Please continue application on next page]

SECTION C: Statement of personal goals

Please write a 500 to 1000-word statement that outlines your personal goals and reasons for pursuing higher education.

SECTION D: Financial information

Expenses

Please list your anticipated expenses for the upcoming school year.

Tuition	\$
Textbooks	\$
Living expenses (E.g. rent,	\$
groceries, Internet)	
Special needs assistance (E.g. medications)	\$
Transportation	\$
Ongoing therapy	\$
Other	\$
Total expenses	\$

Income

Please list your anticipated income for the upcoming school year.

Employment	\$
Disability assistance	\$
Student loans	\$
Savings	\$
Family support	\$
Other scholarships or bursaries	\$
Other	\$
Total income	\$

SECTION E: Referees

As a first-time applicant, you are required to include contact information for three referees, one of whom must be a current or former teacher. These referees will submit their completed and signed reference forms directly to Children's Health Foundation of Vancouver Island following the instructions in the Guide for Referees in the 'Completing the application' section on the bursary website page.

Referee 1:

Name of referee:

Relationship to applicant:

Referee phone number:

Referee email address:

Referee 2:

Name of referee: Relationship to applicant: Referee phone number: Referee email address:

Referee 3:

Name of referee: Relationship to applicant: Referee phone number: Referee email address:

SECTION F: Academic transcripts

Please have your official transcript(s) from your last two years of study mailed to Children's Health Foundation of Vancouver Island (345 Wale Rd.) by May 31.

I agree

When you have completed this application form in full, please **email to bursaries@islandkidsfirst.com**. The Foundation will respond to you via email to verify that your application form has been received. Additionally, you will receive notice when all of your application materials have been received, including proof of residency (if applicable), letter of disability certification, reference letters, and academic transcript(s).

We would like to thank you for taking the time to apply for the Lisa Huus Bursary and wish you the best of luck with the process.