



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 receipt of the completed application is MARCH 1.

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 | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 2. Tuition Waiver | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 3. Parents/parent contribution | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 4. Scholarships/bursaries (do not include this award) | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 5. Part-time work | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 6. Education/University trust fund | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 7. Savings other than #1 above | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 8. Investments | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 9. Canada Pension Benefits | \$ | <input style="width: 95%; height: 15px;" type="text"/> |
| 10. Other (state resources) | \$ | <input style="width: 95%; height: 15px;" type="text"/> |

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	Mother/Stepmother/Guardian
Occupation	<input type="text"/>	<input type="text"/>
Yearly gross income \$	<input type="text"/>	<input type="text"/>

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

<input type="text"/>	<input type="text"/>
Name:	Age:
<input type="text"/>	<input type="text"/>
Name:	Age:
<input type="text"/>	<input type="text"/>
Name:	Age:
<input type="text"/>	<input type="text"/>
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.

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DATE

SIGNATURE OF APPLICANT

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DATE

SIGNATURE OF MOTHER/STEPMOTHER/GUARDIAN

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DATE

SIGNATURE OF FATHER/STEPFATHER/GUARDIAN

Section D: Review and Signature of Principal, Vice Principal or Guidance Counsellor

This application must be reviewed and signed by your Principal, Vice Principal or Guidance Counsellor:

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DATE

SIGNATURE

TITLE

Please send your completed application to:

info@smu.ca

Attention: Assistant Registrar, Admissions and Scholarships

Re: Harrison McCain Scholarship/Bursary

For inquiries please call: 902-420-5414 or email: info@smu.ca

Deadline for receipt of applications is **MARCH 1**

Reminder to applicant:

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