

Section 1 (cont'd)

Describe any physical or athletic activities in which you participate:

Describe any extra curricular activities in which you currently participate:

Describe any Armed Forces training, if any:

State the reasons you believe you qualify for the Leonard Foundation's financial assistance.

Financial Information

A. Funding for this current academic year: List ***all*** scholarships, bursaries, grants, loans (including provincial student aid loans) you ***received*** this year and the value of each

TOTAL VALUE \$

B. Funding for next academic year: List ***all*** scholarships, bursaries, grants, loans (including provincial student aid loans) for which you have ***applied*** or plan to apply for the next academic year and the estimated values of each.

TOTAL VALUE \$

Section 1 (cont'd)

<p>C. Your income – from full and part time jobs</p> <p>Enter your gross earnings from last June to this coming May \$</p> <p>Enter the amount of any other income received from any other source during this same period. \$</p> <p>Enter the amount you anticipate earning from this coming June to May of next year, e.g. from summer employment or part-time work during the school year. \$</p>														
<p>D. Estimate your expenses for the upcoming Academic year commencing this September.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 20%; text-align: center;">Tuition Fees</th> <th style="width: 20%; text-align: center;">Books</th> <th style="width: 20%; text-align: center;">Residence</th> <th style="width: 20%; text-align: center;">Other</th> <th style="width: 20%; text-align: center;">Total Expenses</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>					Tuition Fees	Books	Residence	Other	Total Expenses					
Tuition Fees	Books	Residence	Other	Total Expenses										
<p>E. Will you be required to take up a temporary residence to attend university? Yes <input type="checkbox"/> No <input type="checkbox"/></p>														
<p>F. Independent Applicants – To qualify as an “independent” applicant, you must be <i>permanently</i> domiciled outside of the family home for a number of years and receive no financial support, for living and education expenses from that family. You are required to declare your status, income and assets as well as the status of anyone with whom you may have a partnership. You must provide sufficient detail to justify your financial need.</p> <p style="margin-top: 10px;">Please attach a detailed budget for the next academic year including all revenues and expenses.</p>														
<p>G. Declaration of Applicant</p> <p>I hereby certify the information provided in Section 1 of the Application to be true, correct and complete in all respects.</p>														
<p>_____</p> <p><i>Date (dd-MMM-yyyy)</i></p>		<p>_____</p> <p><i>Signature*</i></p>												

*An electronic signature will be accepted if this application is completed and sent electronically

Section 2

To be completed by parent(s) or guardian(s).

Note: You may be required to provide official documentation that supports your statement of family income (e.g. most recent Canada Revenue Agency, Notice of Assessment).

First Parent/Guardian

Name:	
Relationship:	
Occupation:	
Gross annual income from all sources;	\$
Value of any other benefits received in lieu of a salary, such as a car allowance, housing subsidy, clothing allowance, if any:	\$

Second Parent/Guardian*

Name:	
Relationship:	
Occupation:	
Gross annual income from all sources;	\$
Value of any other benefits received in lieu of a salary, such as a car allowance, housing subsidy, clothing allowance, if any:	\$

*If only one parent's or guardian's income is revealed, please explain why.

I hereby certify the information provided in Section 2 of this Application to be true, correct and complete in all respects.	
_____	_____
<i>Date</i>	<i>Signature *</i>

*An electronic signature will be accepted if this application is completed electronically.

Section 3

Conduct Certificate: To be completed by someone who has known you for at least two (2) years, such as a teacher, member of the clergy, professor or principal who is **not** related to you.

I _____ certify that I have known the Applicant as a person of good character and conduct and one likely to justify selection for an award from The Leonard Foundation and, to my knowledge, needs financial assistance in order to continue her/his education.

Please explain how you know the applicant and any further remarks you would like to make:

Occupation: _____ Telephone: _____

Address: _____

Date (dd-MMM-yyyy) *Signature**

*An electronic signature will be accepted if this application is completed and sent electronically

NOTE TO APPLICANT:

If you do not receive correspondence from the Foundation by May 31, it will be because you were not chosen to receive an award.