Sheridan

APPLICATION DEADLINES
Fall Start (Sept 2013 - Apr 2014) - July 12, 2013
Winter Start (Jan - Aug 2014) - Nov 8, 2013
Spring Start (May - Aug 2014) - March 7, 2014
Applications submitted after the deadline dates will not be accepted

2013 - 2014 Entrance Bursary APPLICATION

Last Name:

First Name:

Sheridan Student ID#:

Social Insurance Number:

In order to be considered for the Sheridan Entrance Bursary, you must be a resident of the province of Ontario and be **entering your FIRST year of attendance** in a Sheridan program on a full-time basis.

ADDRESS INFORMATION

Home Address:

City: Prov: Postal Code:

Phone Number: Email:

When did you last attend high school (secondary) on a full-time basis? Month: Year:

Will you be living with your parent(s) during your 2013/2014 study period? ( ) Yes ( ) No

FINANCIAL INFORMATION You must refer to the instructions page of this application to complete Lines 1 – 16		**OFFICE USE ONLY**
1. Father's/Stepfather's gross annual income	*$	**PC**
2. Mother's/Stepmother's gross annual income	*$	
3. Spouse's/Common Law's gross annual income (if married student)	*$	
4. Total number of dependent children in family, including applicant:		
5. Ages of children:		
6. Number of children attending college/university during 2013 /2014 school year:		
7. Savings prior to summer 2013	$	**OSAP**
8. Estimated savings from summer 2013 earnings		**SAVE**
9. Part-time earnings during 2013/ 2014 while attending Sheridan	$	
10. Expected scholarship money	$	
11. Government income (eg. Orphan/Disability Benefit) (not OSAP) please specify: (per month)	$	**ASSETS**
12. Other assets (eg. GICs, RRSPs, automobiles) please specify	$	
13. Father's/Stepfather's Signature:		**TOTAL**
14. Mother's/Stepmother's Signature:		
I DECLARE THAT THE INFORMATION I HAVE GIVEN ON THIS FORM IS TRUE AND CORRECT AND SUBJECT TO VERIFICATION BY SHERIDAN.		
15. Applicant's Signature:	Date:	
16. Spouse's/Common Law Partner's Signature (if married student)	Date:	

Return completed application to:
Sheridan College • Financial Aid, Room D100 • 1430 Trafalgar Road • Oakville, ON L6H 2L1 • Fax: (905) 815 4083

* amounts entered on lines 1, 2 or 3 must be accompanied by the appropriate signature on lines 13, 14, or 16.

SHERIDAN ENTRANCE BURSARY APPLICATION – Instructions

All sections of this application must be completed. If any section is left blank, a written explanation on a separate piece of paper must be attached. If any section is left blank and no explanation is provided, the application will be considered incomplete and will not be processed.

Your Sheridan student ID number is the identification number associated with your application for admission to Sheridan.

Applications submitted after the deadline dates will not be accepted. Please follow these guidelines to complete lines 1 through 16:

Lines 1, 2, 13 and 14 If your parents are separated or divorced, the parent and his/her partner with whom the applicant currently lives or last lived, or last supported the applicant, must complete these lines.

Lines 1, 2 and 3:
Enter the amounts from line 150 of your parents' or spouse's (if married student) 2012 Income Tax Returns on lines 1, 2 or 3. If these figures are not yet available, enter an estimate and explain why you are doing so on a separate piece of paper.

If lines 1, 2 and 3 are left blank, a written explanation must be provided. If lines 1, 2 and 3 are left blank and no written explanation is provided, the application will be considered incomplete and will not be processed.

If the total of lines 1, 2 and 3 is less than $6,200, please provide a written explanation, on a separate piece of paper, showing how basic needs are being met for your family (it is not reasonable for a family to live on less than $6,200 per year).

Figures entered on lines 1, 2 or 3 must be accompanied by the ap propriate signature(s) on lines 13, 14 and 16.

Line 4:
Enter the total number of children in your family who are under the age of 21 and still in school full-time (include yourself).

Line 5:
Enter the ages of these children.

Line 6:
Enter the number of children in your family who are attending col lege or university during the 2013/2014 school year (include yourself in the figure).

Lines 7 – 11 refer to the applicant (yourself); not your parent(s).

Line 7:
To the best of your ability, estimate the amount of money you will have in your savings account when high school classes end and before you start working for the summer of 2013.

Line 8:
To the best of your ability, estimate the amount of money you hope to save from your summer 2013 employment.

Line 9
If you plan on working part-time during your first year at Sheridan, estimate (to the best of your ability) the amount of money that you hope to earn for the period of time you are attending fall and winter classes at Sheridan.

Line 10:
To the best of your ability, enter the amount of scholarship/award money you think you may receive from your high school or other local sources. Do not include scholarship money you think you may receive from Sheridan.

Line 11:
If you receive government income, such as the Orphan's Benefit (CPP) or Disability Benefit, enter the amount of money you receive every month. Do not enter the amount of OSAP you expect to receive.

Line 12:
Enter the dollar value of any other assets held in your name (not your parents). This might include GIC's, RRSPs or automobiles. Specify the type of asset you are including, e.g. RRSP - $2,500; Car - $3,000.

Line 13
If your Father's/Stepfather's income is listed on line 1, his signature must be entered on this line; if his income is listed on line 1 and line 12 is left blank, the application will be considered incomplete and will not be processed.

Line 14
If your Mother's/Stepmother's income is listed on line 2, her signature must be entered on this line; if her income is listed on line 2 and line 13 is left blank, the application will be considered incomplete and will not be processed.

Line 15
Enter your signature on this line and the date when this form is completed. If your signature is not entered here, the application will be considered incomplete and will not be processed.

Line 16
Your spouse/common law partner (if married student) must sign on this line and enter the date when this form was completed.

Return completed application to:

Sheridan College, Financial Aid & Awards Office, Room D100,
1430 Trafalgar Road, Oakville, ON L6H 2L1, Fax: (905) 815 4083 Email: fin.aid@sheridancollege.ca