

Sony Bursary

1 bursary @ \$1,183.93

Eligibility Criteria:

- Enrolled full-time in the one of the following programs:
 - Advanced Television & Film
 - Media Arts
 - Journalism – New Media
- Good academic standing at Sheridan College (minimum 2.0 GPA)
*****Previous Sheridan full-time GPA required*****
- Demonstrate financial need (complete attached budget form)
- Must be a Canadian Citizen, Permanent Resident or Protected Person, and have resided in Ontario for 12 consecutive months prior to beginning your post-secondary studies

Supporting Documentation To Be Submitted with Application:

- A cover letter explaining your need for financial assistance
- Any other documentation to assist the selection committee (i.e. certificates, awards, letters of recommendation, volunteer work/community involvement, etc.)

Application Deadline:

Submit completed applications to the Financial Aid and Awards Office, D100 Trafalgar Road Campus, B212h Davis Campus or A147c Hazel McCallion Campus by:

Wednesday, January 21, 2015 at 4:30 p.m.

Late or incomplete applications will not be considered.

Any questions? Email: student.awards@sheridancollege.ca

Documents are available in alternate formats upon request by contacting student.awards@sheridancollege.ca

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Personal Information	
Last Name:	First Name:
Student Number:	Social Insurance Number:
Sheridan E-mail Address:	@sheridancollege.ca *
*All communications will occur via your Sheridan email account.	
Program of Study:	
Year: 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/> 4 th <input type="checkbox"/>	
Campus: Davis <input type="checkbox"/> Hazel McCallion Campus <input type="checkbox"/> Trafalgar <input type="checkbox"/> Skills Training Centre <input type="checkbox"/>	
Are you a: Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Protected Person <input type="checkbox"/>	
Have you lived in Ontario for 12 consecutive months prior to beginning your post-secondary studies? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Marital Status: Single <input type="checkbox"/> Married/Common-law <input type="checkbox"/>	
Do you have dependent children? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list age(s):	
Declaration & Signature	
I certify that the information provided in this application is, to the best of my knowledge, accurate and complete. I authorize the release of the information contained in this application to those parties involved with the selection of the successful recipient of this Bursary. I grant permission to Sheridan to share my name, program of study, email and a brief biography as supplied in this application with the donor of this award.	
Signature	Date

STUDENT NAME: _____ STUDENT NO.: _____

Complete the budget form below calculating your resources and expenses for your **eight month** study period. If you are a **co-op** student you may apply only if you are currently in an academic term in which case complete the budget for the **four months** of your academic term.

FINANCIAL RESOURCES			ESTIMATED EXPENSES				
Savings at the beginning of study period			Full Year Tuition Fees				
Gifts, monthly allowances, cash provided by parents, guardians, spouse or others. Include any amounts paid towards tuition or educational costs			Books/Supplies				
Government Income: <i>(check all that apply)</i> <input type="checkbox"/> Child Tax Benefit <input type="checkbox"/> Social Services <input type="checkbox"/> GST rebate <input type="checkbox"/> CPP <input type="checkbox"/> ODSP	\$ _____ X _____ Amount Months	=	Phone/Cable/Internet	\$ _____ X _____ Amount Months	=		
Government Student Assistance: <i>(check all that apply)</i> <input type="checkbox"/> OSAP (including grants) <input type="checkbox"/> Out of province student loans <input type="checkbox"/> Ontario Tuition Grant <input type="checkbox"/> Part-time loans <input type="checkbox"/> Second Career			\$ _____ X _____ Amount Months	=	Utilities (natural gas, hydro, water) \$ _____ X _____ Amount Months	=	
Other resources (list): <i>(check all that apply)</i> <input type="checkbox"/> External Awards <input type="checkbox"/> Cashed in RRSP <input type="checkbox"/> Registered Education Savings Plan <input type="checkbox"/> Bank Loan/Line of Credit <input type="checkbox"/> Child Support			\$ _____ X _____ Amount Months	=	Housing: <input type="checkbox"/> Residence <input type="checkbox"/> Living Away from Home <input type="checkbox"/> Living with Family or Relatives \$ _____ X _____ Amount Months	=	
Employment Income			\$ _____ X _____ Amount Months	=	Food: <input type="checkbox"/> Married/Sole Support <input type="checkbox"/> Living Away from Home <input type="checkbox"/> Living with Family or Relatives \$ _____ X _____ Amount Months	=	
Scholarships/Bursaries			\$ _____ X _____ Amount Months	=	Transportation - Actual cost of travel to/from school \$ _____ X _____ Amount Months	=	
Other Income <i>(please specify)</i> : _____ _____ _____			\$ _____ X _____ Amount Months	=	Child Care \$ _____ X _____ Amount Months	=	
					Personal Care Products/Laundry/Clothing \$ _____ X _____ Amount Months	=	
					Other Expenses <i>(please specify)</i> : _____ _____ _____	\$ _____ X _____ Amount Months	=
TOTAL RESOURCES (A):			TOTAL EXPENSES (B):				

UNMET NEED (SUBTRACT TOTAL RESOURCES (A) – TOTAL EXPENSES (B)): \$ _____

Applications will not be assessed with \$0 resources reported or incomplete budget.