

the Métis
Nation *of*
Ontario

∞ Bursary Fund ∞

APPLICATION FORM 2010

Due October 1, 2010

the Métis
Nation *of*
Ontario
Bursary Award
APPLICATION FORM

Instructions:

- 1) All sections must be fully completed in order for the Bursary Committee to assess your financial need.
- 2) Students must demonstrate financial need in order to be eligible for bursary assistance.
- 3) Completed applications should be submitted to the Fleming College Foundation Office.
- 4) Decisions on bursary applications will be mailed to the address on your application.

A bursary is based on financial need to cover unmet educational costs. It does not have to be paid back, however it is considered taxable income.

NAME: _____ SIN _____

ADDRESS: _____

PHONE NUMBER (_____) _____

Do you self-identify as Métis? Yes No

If you are an MNO citizen please give card #: _____

If no, please fill out the Métis Qualification Form in this application package.

Post Secondary Institution: _____

Area of Study: _____

Year: 1st _____ 2nd _____ 3rd _____ 4th _____

Post Graduate: 1st _____ 2nd _____ 3rd _____ 4th _____

STUDENT CONSENT

If awarded a bursary, I hereby grant permission for my name to be used by the Métis Nation of Ontario and /or the post-secondary institution for the purposes of promotion and marketing of the bursary program.

Signature

Date

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School Year Budget

This budget is based on the following study period:

Start Date: ___/___/___ End Date: ___/___/___
Day/Month/Year Day/Month/Year

Resources

Expenses

Bank Balance at beginning of term including savings from work-term	\$	Tuition and Compulsory Fees	\$
Parental Contribution	\$	Books/Supplies/Instruments/Tools	\$
Spouses Net Income \$ _____ x _____ mths	\$		
Academic Awards	\$	Rent: \$ _____ x _____ mnths	\$
Total OSAP	\$	Utilities: \$ _____ x _____ mths Phone: \$ _____ x _____ mths	\$
Net Part-Time Earnings	\$	Food: \$ _____ x _____ months	\$
Government Income: (Welfare, Orphan's Benefit, Family Benefits, etc.)	\$	Personal Hygiene: \$ _____ x _____ months	\$
MNOTI funding	\$		\$
Support Payments from Ex-Spouse	\$	Clothing	\$
Support Payments from Non-Custodial Parent	\$	Transportation: Local/Home	\$
Gifts	\$	Laundry: \$ _____ x _____ months	\$
Investment Income	\$	Entertainment: \$ _____ x _____ months	\$
Other Resources: (please specify)	\$	Uninsured Medical/Dental: (Receipts req'd)	\$
TOTAL RESOURCES FOR SCHOOL TERM	\$	TOTAL EDUCATION EXPENSES	\$
FINANCIAL ASSISTANCE NEEDED (Resources minus Expenses)	\$		

Declaration:

I declare that the information provided on this application is accurate and a true statement of my financial position.

Student Signature: _____ **Date:** _____

MÉTIS QUALIFICATION FORM

NAME: _____
 Last name First Name Initial

ADDRESS: _____
 Street Address City Postal Code

(Please Use Women's Maiden Name)

GENEALOGICAL INFORMATION – ABORIGINAL ANCESTRY	
Name of your mother: _____	Does your mother have Aboriginal Ancestry? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was she from? _____
Name of your father: _____	Does your father have Aboriginal Ancestry? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was he from? _____
Name of your mother's mother: _____	Is your mother's mother Aboriginal? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was she from? _____
Name of your mother's father: _____	Is your mother's father Aboriginal? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was he from? _____
Name of your father's mother: _____	Is your father's mother Aboriginal? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was she from? _____
Name of your father's father: _____	Is your father's father Aboriginal? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Métis <input type="checkbox"/> North American Indian <input type="checkbox"/> Inuit <input type="checkbox"/>	Where was he from? _____

**** If accessible, please attach any documentation that supports your Métis ancestry**, such as your family tree and records which show Aboriginal ties (for example, marriage or death certificates, census records, land scrip, any historical records of your family stating Aboriginal ties, etc.). Also include copies of your birth or baptismal certificate and photo I.D.

- I hereby affirm:
- a. that I am Métis
 - b. that I reside in the Province of Ontario
 - c. that I have at least one grandparent who is or was an Aboriginal person; and
 - d. that I am not registered under the Indian Act or on an Inuit registry.

_____/_____/_____
Applicant's Signature Witness Signature (Date/ Month/ Year)

****Please Note:** This is not a Métis Nation of Ontario (MNO) citizenship application. This form and any attachments is to be used only to verify that you are Métis. If you would like to apply for MNO citizenship, you can get a form from the MNO head office by calling 1-800-263-4889 (Toll Free)

Metis Nation of Ontario Bursary Award Essay

Please answer the following:

Why are you interested in this area of study? In addition, describe how your studies will contribute to your future employment/employability? Use no more than two pages, and attach to this application form.