

CBE STAFF ASSOCIATION SCHOLARSHIP AWARD

The CBE Staff Association was founded in 1968. Our membership consists of just over 3,300 members and the range of positions is diverse. We believe that Staff Association members are the foundation of the Calgary Public School System and provide a very important service to the students and parents of this city. We feel that it is only fitting that our association provides an opportunity for scholarship monies to help further the education of our members' children.
~Board of Directors, CBE Staff Association on behalf of the Membership, 2011

- DONOR:** CBE Staff Association
- WHERE TENABLE:** Calgary and area schools (any jurisdiction)
- FIELD OF STUDY:** Unrestricted
- VALUE:** \$1,500 – Financial Need; \$1,000 – no financial need restriction
- NUMBER:** Seven awards; four will be determined by the financial need of the applicant (4 x \$1,500 awards); three will have no financial need restrictions (3 x \$1,000)
- ELIGIBILITY:** Open to students registered in grade 12 who are completing the requirements of a high school diploma. Applicants must have marks sufficient for entrance to a post-secondary area of study.
- Student must have a parent or guardian who is a current member in the Calgary Board of Education Staff Association (PSS and Main Body). Parent/guardian must note location of work and position at the end of Section IV, Student Applicant & Parent/Guardian Declaration.**
- Applicants are required to:
1. Submit an original essay describing how this award will impact you in attaining your educational goals. The essay must be no more than 500 words in length (one page, typed or printed).
 2. Submit three letters of reference. The reference letters may be provided from school officials/teachers, employers, or community leaders representing a community-based organizations.
- Selection will be based on the level of financial need, where applicable, essay and letters of reference.
- APPLY:** Applicants should complete the attached **CBE Staff Association Application Form**.
- Complete application packages should be submitted to the Scholarship Coordinator at the applicant's high school.
- SELECTION & PAYMENT:** Recipients are selected by September by the EducationMatters Student Awards Selection Committee. To claim the award, within eighteen (18) months of notification of award, the recipient must be registered in an eligible program of post-secondary study in Canada. Payments are made to the post-secondary institution.
- DEADLINE:** Normally **May 30** to the Scholarship Coordinator at the applicant's high school. Applicants should check with their Guidance office for application deadlines in their school.

2017 CBE STAFF ASSOCIATION SCHOLARSHIP AWARD APPLICATION

SECTION I – PERSONAL & EDUCATIONAL INFORMATION

INFORMATION PROFILE			
Last Name:	First Name:	Middle Name:	
Previous Last Name:			
Current Home Address:		Permanent Mailing Address (if different from current address):	
City:	Province:	Postal Code:	Canadian Social Insurance Number:
Residence Telephone:		Cell Phone:	Alberta Learning ID #:
Date of Birth (Y/M/D):	Male <input type="checkbox"/> Female <input type="checkbox"/>	E-Mail Address:	
EDUCATIONAL INFORMATION			
Current High School or Program:		Number of high school credits by end of this year:	
HIGH SCHOOLS ATTENDED:			
	School Name	City/Province	Date completed
Grade 10			
Grade 11			
Grade 12			
Grade 12 Returning			
LIST OTHER AWARDS APPLIED FOR, RECEIVED, OR WILL BE RECEIVING AND THEIR VALUE:			
AWARD NAME	VALUE	RECIPIENT	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>	
List all Honors, Advanced Placement, International Baccalaureate, and any other enrichment courses taken during high school:			
What post-secondary institution do you plan to attend:			
What type of degree / certificate / apprenticeship will you earn upon graduation?			Program / Major:
Length of Program:			

SECTION II – WRITTEN ESSAY & REFERENCES

Name:	CBE/CCSD ID:
WRITTEN ESSAY:	
<ul style="list-style-type: none"> • Use a separate sheet to write your essay as set out in the Terms of Reference for the award for which you are applying. • Include your name, identification number and the name of award at the top of the essay. • If you are applying for more than one award that requires a written essay, attach a separate essay for each award with your name, identification number and the name of the award <u>at the top of each page</u>. • You must include a word count at the bottom of the <u>page</u> for each essay. Essays that exceed the maximum length of 500 words (<i>unless otherwise specified in the Terms of Reference</i>) may be disqualified. • In essays on particular topics, support your findings with primary research, documenting your sources (e.g. web sites, books). • Your essay will be judged on the following criteria (<i>unless otherwise specified in the Terms of Reference</i>): <ul style="list-style-type: none"> ○ Organization ○ Ideas and content ○ Clarity of expression • Essays must be typed on an 8.5 x 11 sheet of paper, single-spaced with three-quarter inch margins and the type size must be no smaller than 11-point font. <p>All essays must be original and written by the applicant. Plagiarism will disqualify the application.</p>	
REFERENCE LETTERS:	
<p><i>Letter(s) must be typed, signed, printed on official letterhead (where possible) and must not exceed one page. Letters should also refer to the name of the award(s) for which the referee is writing the letter.</i></p>	
Name of Referee #1 (Please Print/Type):	E-mail address:
Position:	School or Organization:
Address:	Telephone:
<hr/>	
Name of Referee #2 (Please Print/Type):	E-mail address:
Position:	School or Organization:
Address:	Telephone:
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Name of Referee #3 (Please Print/Type):	E-mail address:
Position:	School or Organization:
Address:	Telephone:

SECTION III – FINANCIAL INFORMATION: Complete this section only if you are applying based on Financial Need.

PLEASE ATTACH INCOME TAX NOTICE OF ASSESSMENTS FOR EACH PARENT/GUARDIAN AND STUDENT

Independent Student Status: At the time of application, are you living away from the family home and/or independently responsible for all of your financial & maintenance requirements?

Yes__ (Please provide your individual financial information below) No__ (Please provide income information for “household” as described below).

Statement of Independent or Household Financial Condition as of December 31, 2016

- The following information is to be completed in full. If an area does not apply to your household situation please enter **\$0.00** in that column.
- Definition of “household” includes parent(s), step-parent(s), legal guardian(s) and the applying student. All Income and Asset amounts for the “household” must include figures for all individuals within the “household”.
- Copies of all Canada Revenue Agency’s **Notice of Income Tax Assessments (or other supporting financial documentation)** must be provided for each of the required reporting years for each individual included in the “household” definition above. **Tax information for siblings is not required. Failure to provide these documents may result in disqualification.**
- Supporting documentation for other financial information stated is not required at this time, but may be requested at a future date for verification.

Total Annual Income for “household” (sum of ALL individuals as specified above)

You must provide 2016 Tax Year information

2016 Tax Year

Employment Income (Gross Taxable income, line 150 on tax return)	
Property Rental Income	
Business Income	
Professional Income	
Pensions Income	
Income from All Other Sources (unemployment insurance, child support, etc.)	
Total Annual Combined Income for “household”	\$

ASSETS (Resources OWNED by “household”) - (sum of ALL individuals as specified above)

TOTALS

Investments (Stocks, bonds, mutual funds, retirement savings plans, trust units, etc.)	
Business Interests	
Equity Held In Real Estate (Home, vacation property, rental property, etc.)	
Savings	
Other	
Total Assets	\$

Does the student have any trust funds, registered education savings plans, other confirmed scholarships or grants, or any other amounts of money that have been pledged for the purposes of funding his/her education? Yes ___ No ___

If yes, what is the total amount of such additional funding? _____

of dependants under the age of 18: _____ # of dependants over the age of 18 (please describe in detailed statement): _____

Do you live in a single income household? Yes___ No ___ Do you live in a single parent family? Yes___ No___

Are you (the applicant) currently engaged in part-time employment **OR** have you previously been engaged in part-time or summer employment in the last year? Yes ___ No ___

Employer: _____ Hours/week: _____ Gross Earnings (Annual): _____

Are you currently on a school fee waiver? Yes No

REQUIRED Please attach a separate page outlining your need for financial assistance, noting circumstances such as (but not limited to)

- Living arrangements (personal & family)
- Reasons for choosing your selected University/Post-Secondary institution & its location
- Any other extenuating financial circumstances such as medical situations, unemployment etc.
- Please also describe any additional financial support you and/or your family are receiving (particularly if declared household income is less than \$20,000/year).

SECTION IV – SIGNATURE/ENDORSEMENT – * PLEASE ATTACH A COPY OF YOUR HIGH SCHOOL TRANSCRIPT*

HIGH SCHOOL COUNSELOR (OFFICIAL) ENDORSEMENT

To the best of my knowledge and belief, I hereby verify that the academic information and summary of school activities as submitted in this application are correct, and the applicant meets the eligibility requirements as outlined in the award Terms of Reference.

IF THIS STUDENT HAS INDICATED THAT THEY ARE AN INDEPENDENT STUDENT AND/OR ARE ON A SCHOOL WAIVER, PLEASE VERIFY THAT THIS INFORMATION IS CORRECT.

YES, I VERIFY THAT THIS STUDENT IS AN INDEPENDENT STUDENT AND/OR IS ON A SCHOOL WAIVER .

Applicant's Average Grade calculation:	Grade 10	Grade 11	Grade 12	OVERALL
Printed Name:	Signature:			
Title:	Email:			
Name of Institution:	Telephone:		Date:	

STUDENT APPLICANT & PARENT/GUARDIAN DECLARATION

*This information is collected under the authority of the Freedom of Information and Protection of Privacy Act, the Taxation Act (Canada) and the Statistics Act (Canada) to determine your eligibility for scholarships and awards. Please direct any questions about the use of this information to the Grants and Stewardship Officer, EducationMatters - 1221 8 ST SW, Calgary, Alberta, Canada T2R 0L4. Telephone: (403) 817-7468. **** We reserve the right to publish student essays in full or in part. If you do not want your essay to be published, please check here . Recipients may be recognized at public award ceremonies and/or their names may be displayed publicly in one or more ways including but not limited to: CBE Staff Association communications, newspaper, school newsletter, yearbook, and website, for the purpose of recognizing student accomplishment(s). If you do not wish to be recognized or for your name to be published, please check here .*****

By signing this application, I declare:

1. That I have answered all questions applicable to me and that all information is true and complete
2. That I will notify EducationMatters if I withdraw from full-time status, receive other external awards or otherwise change my student status
3. That EducationMatters may request additional information pertaining specifically to my academic performance and enrolment status for the purpose of determining my eligibility for scholarships/awards
4. That in applying for an award, pertinent information may be released to the donor of the award, provincial funding bodies, faculty offices, appropriate EducationMatters and Calgary Board of Education / Calgary Catholic School District administrative offices
5. That if I receive a scholarship/award the amount may be disclosed to the CBE or CCSD Financial Services Office
6. That I understand the information provided on this application may be used for research and statistical analysis
7. That if any information is inaccurate, I understand that any awards may be reassessed and/or withdrawn
8. That if I receive an award, I will acknowledge the donor of the award, CBE Staff Association, with a personal letter of thanks

Name of Applicant (Printed):	CBE / CCSD ID Number:
Signature	Date
<i>I acknowledge and agree that the disclosure of the information provided for this application, including my personal financial information, is required for the assessment of my child's/dependant's eligibility for this award, and I hereby grant such consent as may be required by applicable privacy laws to the disclosure of my personal information for the purpose of assessing my child's/dependant's eligibility.</i>	
Name of Parent(s)/Guardian(s) - (Printed):	Parent/Guardian is a CBE Staff Association Member? y_____n____
	CBE Position _____ Location of Work _____
Signature	Date

SUBMIT YOUR COMPLETED APPLICATION DIRECTLY TO YOUR SCHOLARSHIP COORDINATOR