

Eligibility Criteria:

- The student is a resident of Guelph or Wellington County.
- Students must demonstrate resiliency in overcoming adversity when faced with personal, social, family or learning difficulties in order to achieve academic goals required to continue post-secondary studies
- Without financial assistance, the student might not otherwise be able to continue his or her education.
- **Proof of enrolment** is required. *Please note: an offer of admission is not sufficient – we must receive something that indicates the student has accepted the offer and is enrolled in the program.*

Applications to be completed by the **Student** and **Administration** of the referring Secondary School and returned to the Children's Foundation by **Friday, May 1, 2020.**

Part One: Student Information

First & Last Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone: _____

E-mail: _____

Age: _____ Gender: _____ Date of Birth: _____
(identified with) (dd / mm / yyyy)

Part Two: Secondary School Information

Name of Secondary School: _____

Contact Name & Position: _____

Telephone: _____ Ext. _____

Email: _____

Date, Time, and Location of Commencement: _____

Part Three: Post-Secondary Information

Name of the Post-Secondary Institution attending: _____

Intended Program of study: _____

Check one:

The student has been accepted to this program.

The student is waiting for an offer of admission.

Proof of enrolment will be required. Please include with application or send as soon as available. An offer of admission is not sufficient – we must receive something that indicates the student has accepted the offer and is enrolled in the program.

Part Four: Student's Story

Student: Please share your story by submitting answers to the following questions in the format of your choosing (written, visual, AV). A one-page story (or equivalent) is sufficient. Assistance from a teacher or guidance counsellor is allowed, if needed.

1. Explain your struggles (personal, family, social or educational difficulties). How have you overcome these struggles to graduate high school and pursue post-secondary education?
2. What are your educational / career goals?
3. How do you think receiving this scholarship will help you?
4. How will this Scholarship assist with your post-secondary goals?

You are welcome to include a letter of recommendation.

Part Five: Waiver & Permission

I/We hereby state that the above information is accurate and authorize the Children's Foundation of Guelph and Wellington to make any inquiries it deems necessary to verify this information, and that the confidentiality of such information will be respected. I/We understand that the Children's Foundation has the right not to grant any or all of the funds requested.

I, the scholarship student, give permission to the Children's Foundation to use some or all of my story information for promotional or fundraising purposes, and I understand that the Children's Foundation will change or remove identifying information including my name for privacy. I understand that I can refuse permission by checking the box below, or at any time in the future by notifying the Children's Foundation in writing.

I do not want my story used for promotional or fundraising purposes.

Application will be viewed **only** by members of the Children's Foundation Scholarship Committee.

Signature of Student: _____

Signature of School Contact Person: _____

Check one:

Proof of Enrollment is attached. Proof of Enrollment is still to come.

Please note: an offer of admission is not sufficient proof of enrollment – we must receive something that indicates the student has accepted the offer and is enrolled in the program.

Dated this _____ day of _____ 2020

For CFGW Use Only

Date Received: _____ Proof of Enrolment Received: _____

Authorization: _____

Scholarship Award Sent: _____ Date: _____