Centre for Continuing Studies
VCC Bursary Application

Vancouver Community College

www.vcc.ca

A bursary is non-repayable funding provided to students who:
1. Are registered in Continuing Studies Certificate/Diploma programs
2. Have successfully completed a course/term of study
3. Demonstrate financial need and
4. Have no outstanding debts to VCC
5. Application deadlines: November 1 and March 1

1. Personal Information:

VCC Student Number ☐☐☐☐☐☐☐☐☐ (Area Code) ☐☐☐ - ☐☐☐ - Telephone Number ☐☐☐☐

Name _____
Last First Middle

Address _____
Street Address City/Province Zip code

Social Insurance Number ☐☐☐ ☐☐☐ ☐☐☐

_____ Class hours per week_____
Certificate/Diploma Program

Marital/Family Status: ☐ Single/Sep ☐ Married ☐ Single parent Number of dependent(s) living with you _____
Their age(s) _____

2. Financial Information:

Do you/your spouse own/lease a motor vehicle/car? ☐ No ☐ Yes Make/Model _____ Year _____

Current value $ _____ Purchase date: _____

Living arrangements: ☐ Rent ☐ Own home ☐ Live with parents

3. Budget Information:

Monthly Income	**Student**	**Spouse**	**One Month's Family Expenses**	
Work	$ _____	$ _____	Rent	$ _____
Income Assistance (e.g. EI)	$ _____	$ _____	Food	$ _____
BC Bonus/Child Tax Benefit	$ _____	$ _____	Transportation	$ _____
Student Loan/Grant	$ _____	$ _____	Daycare/Babysitting	$ _____
Other Income: (Specify)	$ _____	$ _____	Telephone	$ _____
	$ _____	$ _____	Hydro	$ _____
			Cable	$ _____
			Other Expense: (Specify)	$ _____
				$ _____
TOTAL Family Income =	$ _____		**TOTAL** Expenses =	$ _____

4. Savings in the bank: $ _____ Other Investments (such as RRSP's, Term Deposits): $ _____

I certify that the above information is complete and correct.

Please note: This application MUST be accompanied by:
1. **A cover letter briefly outlining personal circumstances.**
2. **A course receipt and/or transcript.**

_____ _____
Applicant's Signature **Date**

FOR OFFICE USE ONLY:
Approved: Yes ____ No ____ Fund # _____ Fund Name _____ $ _____ Approved _____ Date_____/_____/ 2006
Day Month Year
Rank # Family _____ Specified Unmet Need _____ Max BCSAP Award _____ Term _____

The information on this form is collected to determine eligibility for a bursary from VCC as per VCC Bursary Policy. If you have any questions about the collection and use of this information, please contact the Director, Centre for Continuing Studies.