AFABC Youth Bursary Application

Application Deadline: October 10, 2016

The AFABC Youth Bursary awards financial assistance to youth who have joined their families by legal adoption, and plan to pursue a vocational, trade or academic post-secondary program at an accredited BC institution. This fund will award two $1,000 bursaries on an annual basis, intended to directly offset tuition and/or other expenses associated with educational programs. Awards will be announced November 1, 2016 and paid through the Adoptive Families Association of BC.

Eligibility Requirements

- You have joined your family by legal adoption.
- You are currently a BC resident.
- You are over 17, and under 25 years of age, on the date of the bursary application deadline.
- You are registered in a vocational, trade or academic post-secondary program at an accredited BC institution.

Application Requirement List:

A. Application Form

Please complete all sections of the application form, including personal information, education information and financial assistance sections.

B. Confirmation of Adoption Status

Please provide written confirmation of your adoption status

C. Confirmation of School Registration

Please provide documentation of registration from the school you plan to attend.

D. Cover Letter

Please provide a cover letter telling the selection committee a little bit about you.

E. Reference Letters

Please provide two letters of reference from two significant people in your life.

F. Applicant Authorization Form

Please complete the authorization form attached to this application.

G. Applicant Consent Form

Please complete the consent form attached to this application.

A. AFABC Youth Bursary - Application Form

To ensure eligibility, all sections of the application form must be completed and all other components submitted by bursary application deadline date. Please see checklist on last page.

Notes:

- Please type answers to all questions in the space provided. This application form is fill-able.
- Please keep a copy of your application for your own records. AFABC will dispose of all paper and electronic application copies after award recipients for the year have been chosen.

Personal Information:

First Name: _____

Last Name: _____

Date of birth: (mm/dd/yy) _____ **Age:**_____

Address: _____

City: _____ **Postal code**:_____

Home Phone: _____

Cell Phone: _____

Email address: _____

Note: Please inform us if you move or change your contact information. If we cannot contact you, your application will not be considered.

How did you hear about the AFABC Bursary Program?

☐ AFABC Website ■AFABC Magazine ■ AFABC Facebook

☐Family / Friends ☐Scholarship Website _____

☐ Community Group ☐Other_____

Education Information:

1. What is the most recent level of education you have completed?

❍Grade 12 ❍Program Certificate ❍College Diploma/Degree ❍University Degree ❍Other

Name and year of school last attended:

_____

2. What is the name of the trade, vocational or academic program you plan to attend?

_____

Please provide name of BC institution and campus location:

_____

Length of Program: ❍1 Year ❍2 Year ❍3 Year ❍4 Year ❍Other_____

Start date: (mm/yy): _____Expected completion date: (mm/yy) _____

Note: Written confirmation of school registration is a required part of this application. (Item C).

3. Why have you chosen this program? (150 word limit)

4. What is your education and career plan? (150 word limit)

5. How would this Bursary help you to achieve your goals? (150 word limit)

Financial Assistance:

1. Have you received funding from the AFABC Bursary Program in the past? ❍ Yes ❍ No

If Yes: Year: _____ Amount: _____

How has it assisted you? _ (150 word limit)

2. What other financial supports have you explored or are you currently receiving?
(Listing other opportunities will not disqualify you from receiving this bursary.)

Please check all that apply and provide details in space provided:

☐ Youth Education Assistance Fund ☐ Student loan ☐ Grant ☐ Scholarship ☐ Bursary

☐ Other _____ (150 word limit)

3. Do you have other sources of income (150 word max)? Please describe (savings, employment, etc.).

B. Confirmation of Adoption Status

Please provide written confirmation of your adoption status.
A letter from your adoptive parent is acceptable for the application process. Please ensure that the letter is signed and dated and that the full name and contact information of the writer is included on the letter.
Note: If your application is chosen for an award, you will be required to provide legal adoption documentation to the selection committee within 1 week of award notification

C. Confirmation of School Registration

Please provide written confirmation of your registration for the program, and from the school, indicated on this application.

D. Cover Letter – 2 page maximum

Please provide a cover letter telling the selection committee a little bit about yourself.
Please include: achievements and successes, challenges and obstacles, plans for the future, volunteer and/or work experience, and how this bursary would contribute to your success.
Two pages maximum please.

E. Two Reference letters

Please attach two letters of reference from two significant people in your life. One of the letters needs to written by a non-family member. Maximum one page each.

The letters should provide information about you in the following areas:

- What qualities and/or achievements make you a good candidate for the educational program you have chosen?
- How does the reference believe you will benefit from this Bursary?

Note:
Please ensure that the letter is signed and dated, and that the full name and contact information of the writer is included on the letter.

F. Applicant Authorization Form

The information that I provided for this application is true, accurate and complete.

I am aware that providing incomplete or false information will affect the consideration of my application and affect my ability to access future funding. I am aware that the granting of this Bursary is subject to conditions that would be listed in an acceptance letter.

I provide AFABC with the following authorizations:

1) I authorize the Adoptive Families Association of BC to distribute this application to the Selection Committee for review.

2) I authorize the Selection Committee to contact my references.

Applicant name: _____

Applicant signature: _____

Date: _____

Witness name : _____

Witness signature: _____

Date: _____

Note:

The Adoptive Families Association of BC respects your privacy. All information collected will be used by AFABC only, in accordance with AFABC Privacy Policy. For details please contact our privacy officer at 604-320-7330 ext 114, or visit www.bcadoption.com

G. Applicant Consent Form

Signing this consent form gives the Adoptive Families Association of BC permission to publicly recognize the award recipient.

Please check all boxes that apply:

☐ If selected for a Bursary, I hereby give consent to AFABC to publish my name, city of residence and the school/program I plan to attend, for the purpose of recognizing me as a bursary award recipient.

☐ If selected for a bursary award, I grant AFABC permission to record my likeness and/or voice on a video, audio, photographic, digital, electronic, or any other medium (collectively referred to as "the recordings") for promotional purposes. I acknowledge that all rights, title, and interest to the recordings will belong to the Adoptive Families Association of BC. I allow AFABC to publish the recordings. Publication includes print and electronic publications, video tapes, CD, audio, and Internet distribution. I give permission for the use of the above described materials for the period of five years from the date below. If I choose to revoke this permission, I understand that new materials will not be produced, but that the materials already made will not be altered.

☐ I do not give my consent. I understand that my application will still be fully considered, without prejudice.

Applicant name: _____

Applicant signature: _____ _____

Date: _____

Witness name: _____

Witness signature: _____ _____

Date: _____

AFABC Youth Bursary - Application Checklist:

Please make sure you have included all 7 items in your application package.

- ✓ **A. Application Form**
- ✓ **B. Confirmation of Adoption Status**
- ✓ **C. Confirmation of School Registration**
- ✓ **D. Cover Letter**
- ✓ **E. Reference Letters**
- ✓ **F. Applicant Authorization Form**
- ✓ **G. Applicant Consent Form**

How to Submit Your Application:

Please submit completed application package by midnight October 10, 2016:

By mail:

AFABC Youth Bursary
C/O Adoptive Families Association of BC
200-7342 Winston Street
Burnaby, BC V5A 2H1

By email:

bursaries@bcadoption.com

Notes:

Howard Legacy Youth Fund applicants will be notified by email if/when:

- ✓ their application has been received by AFABC
- ✓ their application has been reviewed for eligibility and completeness
- ✓ their application has been forwarded to the selection committee
- ✓ a bursary has been awarded or denied

If you have any questions:

Please contact Tanika Dodds: tdodds@bcadoption.com / 604-320-7330 ext 135