

2019-2020 K-GRADE 12 ADDITIONAL BURSARY APPLICATION FORM

PARENT/GUARDIAN INFORMATION
Full Name
Full Name
Marital Status

CHILDREN		
	Full Name	Date of Birth (mm/dd/yyyy)
First Child		
Second Child		
Third Child		
Fouth Child		
Fifth Child		

VALUE OF ASSETS		
Home Address	City	Postal Code
Check one: <input type="checkbox"/> Rent <input type="checkbox"/> Own If you own: Balance of outstanding mortgage = \$ _____ Assesed value of property as per City of Winnipeg property assessment = \$ _____ (or find at www.winnipegassessment.com/asmntax/english/propertydetails/) Other owned real estate property: Do you own or have partial ownership in other real estate? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: <input type="checkbox"/> Own Fully <input type="checkbox"/> ____% Ownership		
Address	City/Town	Postal Code
Balance of outstanding mortgage = \$ _____ Assesed value of property as per property assessment = \$ _____		

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VALUE OF ASSETS CONTINUED			
Household Cars and Recreational Vehicles			
Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____			
Check one: <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____			
Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____			
Check one: <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____			
Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____			
Check one: <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____			
Business Assets			
Do you own or have partial interest in a business or company? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Own Fully <input type="checkbox"/> ____% Ownership			
If yes, please list and attach the latest set of financial statements available.			
Name of Business or Company		Address	
Other Assets			
Savings	\$ _____	Bonds	\$ _____
Investment Accounts	\$ _____	Securities	\$ _____
GICs	\$ _____	Trust & Inheritance	\$ _____
Stocks	\$ _____	Other Assets over \$5000	\$ _____

EXPENSE INFORMATION	
<i>Please calculate annual expenses from 2018 below. Place a value of \$0 to those lines that do not apply.</i>	
Expenditures	Annual 2018
Mortgage Payments for All Owned Properties	\$ _____
Property Taxes for All Owned Properties	\$ _____
Rent	\$ _____
Loan(s) (purpose _____)	\$ _____
Car Lease (s)	\$ _____
Utilities (gas, hydro, phone, cable, internet)	\$ _____
Insurance (home, car, life)	\$ _____
Registered Savings Plan Contributions	\$ _____
Cost of Vacations	\$ _____
Child Care Expenses	\$ _____
Memberships	\$ _____
Classes/Activities (dance, swimming, hockey, etc.)	\$ _____
Summer Camp	\$ _____
Synagogue Membership	\$ _____
Medical/Dental Expenses	\$ _____
Household University/College Tuition Paid	\$ _____
Other - Please list	\$ _____
Other - Please list	\$ _____
Total = \$	_____

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We/I hereby certify that the above information is true, correct, and complete in every respect

We/I understand that misrepresentation or non-disclosure may void any agreed bursary assistance and that we/I may be required to provide additional information and/or supporting documents for this application to be considered by the Assessment Committee. This application will be cancelled and/or any bursary withdrawn if any relevant information has been withheld, or is misleading in any way. Should circumstances change during the 2019-20 school year and we/I no longer need additional bursary assistance, we/I acknowledge that we/I must immediately report this to the Finance Department. We/I understand that the Parental Contribution will be adjusted accordingly from that point forward (making bursary assistance available to help other families in need).

*Signature of parent/guardian:	Date:
*Signature of parent/guardian:	Date:

*Both parents/guardians need to sign this form, either on the same form or in counterparts.