



## PROVINCE OF BRITISH COLUMBIA

### The Public Guardian and Trustee Educational Assistance Fund

#### BURSARY APPLICATION

**2019- 2020**

Public Guardian and Trustee Educational Assistance Fund bursaries are awarded annually in consultation with the Ministry of Children and Family Development from a limited fund to high school graduates who are 19 years old or over and pursuing a post-secondary academic, technical or vocational program. **These bursaries are only available to former permanent wards of the Ministry of Social Services and those formerly in continuing custody of the Ministry of Children and Family Development of the Province of British Columbia**

These bursaries assist recipients to further their academic or vocational goals by supplementing existing funding to cover shortfalls which otherwise might cause the individual to terminate their studies prematurely. **Applicants must have other sources of funds.**

#### **ANNUAL APPLICATION**

**DEADLINE: APRIL 15, 2019**

Please submit completed application to:

Personal Trust Administrator  
Estate and Personal Trust Services  
Public Guardian and Trustee of British Columbia  
700 – 808 West Hastings Street  
Vancouver, BC  
V6C 3L3

**PLEASE READ THIS FORM CAREFULLY AND ANSWER ALL THE QUESTIONS FULLY AND ACCURATELY. WHERE QUESTIONS DO NOT APPLY TO YOU, MARK N/A. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. ADDITIONAL INFORMATION MAY BE ATTACHED IF REQUIRED.**

### **SECTION I - PERSONAL INFORMATION** (Please print in black ink)

1. Name(Mr.,Mrs.,Miss,Ms.) \_\_\_\_\_  
Surname First Name Middle Name

Birth Name if different from above \_\_\_\_\_

2. Eligibility - Period you were a permanent ward or in continuing custody:

From \_\_\_\_\_ to \_\_\_\_\_

3. Home Address

4. Mailing Address (If different)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Phone # ( ) \_\_\_\_\_
6. **Date of Birth** \_\_\_\_\_  
 Day/Month/Year  
 Age as of **December 31, 2019** \_\_\_\_\_ years old
7. S.I.N. \_\_\_\_\_
8. Marital Status:  Single  Married/or Common-law  
 Widowed  Separated/Divorced
9. List dependants, under 19 years of age, in your custody:

FULL NAME	AGE
_____	_____
_____	_____
_____	_____

10. First Nations member: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

**NOTE:**

This bursary is **ONLY** available to individuals who were permanent wards of the Ministry of Social Services or who were in continuing custody of the Ministry of Children and Family Development of the Province of British Columbia until age 19 and meet the criteria set out in our webpage [PGT of BC: Estate and Personal Trust Services](#). If you are uncertain about your eligibility, please provide approximate dates. Wardship status will be confirmed by the Ministry of Children and Family Development (formerly the Ministry of Social Services).

**SECTION II: EDUCATIONAL INFORMATION**

1. High School Graduation/Equivalency: Date: \_\_\_\_\_ School: \_\_\_\_\_
2. School/college/university last attended \_\_\_\_\_  
 Dates Attended \_\_\_\_\_ **ATTACH MOST RECENT TRANSCRIPT**
3. Intended program of study \_\_\_\_\_
4. Name of institution/college/university \_\_\_\_\_
5. Length of program (years/semesters/hours) \_\_\_\_\_
6. Number of years/semesters/hours completed \_\_\_\_\_
7. Number of additional years/semesters/hours required for completion \_\_\_\_\_
8. Full-time or part-time study? Full Time \_\_\_\_\_ Part Time \_\_\_\_\_
9. Start and end dates (anticipated) \_\_\_\_\_  
 Start (Month/Year) \_\_\_\_\_ End (Month/Year) \_\_\_\_\_

10. Describe your career goals and how you plan to attain them?

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11. Why do you believe you would be suitable for your chosen career? **(Also attach letters of recommendation)**

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### SECTION III - EMPLOYMENT, ASSETS AND LIABILITIES

1. List work/volunteer experience for past two years, including full-time, part-time and summer jobs (most recent first). Attach separate sheet if necessary.

<b>Employer #1 -</b> _____	Length of Employment: _____
Address: _____	From: _____ To: _____
Type of Work: _____	Monthly Income: _____
<b>Employer #2 -</b> _____	Length of Employment: _____
Address: _____	From: _____ To: _____
Type of Work: _____	Monthly Income: _____
<b>Employer #3 -</b> _____	Length of Employment: _____
Address: _____	From: _____ To: _____
Type of Work: _____	Monthly Income: _____

2. List any assets that you own by yourself or with others (vehicle, investments, RRSPs, real estate, etc.). Do not list appliances, furniture or personal effects:

Asset	Market Value	Amount Owed on Asset	Your Equity
a)			
b)			
c)			
d)			

Explain why these assets cannot be sold or refinanced to meet your educational needs. (Except a vehicle with a value of under \$6,000.00.).

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3. List any scholarships, bursaries or prizes awarded for your current or upcoming school year(s) (attach separate sheet if necessary):

Name of Award	Month & Year Received	Received for school year	Amount	Can you re-apply?

4. List any outstanding loans, including student loans, credit cards etc.

Name of Creditor	Month & Year Borrowed	Balance Outstanding

5. Have you applied for student loans for the upcoming academic year?                                            
Yes No

6. If not, please explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

7. Are you eligible for student loans?                                                                 
Yes No Don't Know

8. Have you applied for a bursary under the Youth Educational Assistance Fund?                                            
Yes No

For more information about the Youth Education Assistance Fund, contact:  
 Ministry of Advanced Education – Student Services Branch  
 Attn: Special Programs Unit PO Box 9173 Stn Prov Govt  
 Victoria, BC V8W 9H7 or : [AVED.SpecialPrograms3@gov.bc.ca](mailto:AVED.SpecialPrograms3@gov.bc.ca)

9. If not, please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

10. Are you eligible for, or are you in receipt of, Orphan's Benefits through CPP?                                                                 
Yes No Don't Know

## SECTION IV - BUDGET

1. During the upcoming academic year of **September 2019 to August 2020**, the period of my study will begin \_\_\_\_\_ and end \_\_\_\_\_.  
month/year month/year

2. During this time I will be living in:

\_\_\_\_\_ self owned residence

\_\_\_\_\_ rented accommodation

\_\_\_\_\_ school residence

\_\_\_\_\_ other, explain: \_\_\_\_\_

\_\_\_\_\_

3. Will you be working during this time period? \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ESTIMATES FOR THE PERIOD OF MY STUDY**

<b>Estimated Monthly Income</b>	
Net Earned Income from employment:	
Applicant	\$ _____
Spouse	_____
Social Assistance/GAIN	_____
Daycare Subsidy	_____
Child Support	_____
Spousal Allowance	_____
Family Allowance	_____
GST Credits	_____
Orphan's Benefits	_____
Post Majority Funds	_____
Other Income (please specify)	_____
<b>TOTAL MONTHLY INCOME</b>	<b>\$ _____ (A)</b>
Multiply total (A) by the number of months you will be studying this academic year (from previous page)	_____
	<b>\$ _____ (B)</b>
ADD: Any of the following available for this period	
Scholarships	_____
Bursaries	_____
Savings	_____
Student Loans	_____
<b>Total Other Funds</b>	<b>_____ (C)</b>
<b>TOTAL AVAILABLE FUNDS FOR MY PERIOD OF STUDY(B+C)</b>	<b>\$ _____ (D)</b>

<b>Estimated Monthly Expenses</b>	
Rent or Mortgage Payments (incl. taxes)	\$ _____
Food	_____
Clothing	_____
Heat & Electricity	_____
Telephone	_____
Cable	_____
Insurance – house	_____
- vehicle	_____
Loans (details in S(III)(4))	_____
Transportation, gas, buspass, etc.	_____
Daycare	_____
Medical and Dental	_____
Payment of Child Support/ Spousal Allowance	_____
Other expenses (please specify)	_____
<b>TOTAL MONTHLY EXPENSES</b>	<b>\$ _____ (E)</b>
Multiply total (E) by the number of months you will be studying this year (from previous page).	_____
	<b>\$ _____ (F)</b>
ADD: Educational Costs	
Tuition	_____
Books	_____
Supplies	_____
<b>Total Educational Costs</b>	<b>_____ (G)</b>
<b>TOTAL EXPENSES FOR MY PERIOD OF STUDY (F+G)</b>	<b>\$ _____ (H)</b>

FINANCIAL NEED (H – D) = \_\_\_\_\_ (Amount by which Expenses exceed Income)  
 (Expenses must exceed income to be eligible for this bursary)

What is the maximum amount of student loans for which you qualify for this period? \$ \_\_\_\_\_

**ESTIMATES FOR THE 1 YEAR PERIOD PRIOR TO MY PERIOD OF STUDY**

ESTIMATED YEARLY INCOME		ESTIMATED YEARLY EXPENSES	
Net Earned Income from employment:		Rent or Mortgage Payments (incl. taxes)	\$ _____
Applicant	\$ _____	Food	_____
Spouse	_____	Clothing	_____
Social Assistance/GAIN	_____	Utilities	_____
Daycare Subsidy	_____	Insurance - house	_____
Child Support	_____	- vehicle	_____
Spousal Allowance	_____	Loans (details in S III (4))	_____
Family Allowance	_____	Transportation, gas, buspass, etc.	_____
GST Credits	_____	Daycare	_____
Orphan's Benefits	_____	Medical and dental	_____
Post Majority Funds	_____	Payment of Child Support/Spousal Allowance	_____
Other Income (please specify)	_____	Other expenses (please specify)	_____
	_____		_____
	_____		_____
<b>TOTAL YEARLY INCOME</b>	<b>\$ _____ (A)</b>	<b>TOTAL YEARLY EXPENSES</b>	<b>\$ _____ (D)</b>
ADD: Any of the following available for that period		ADD: Educational Costs paid that period	
Scholarships	_____	Tuition	_____
Bursaries	_____	Books	_____
Savings	_____	Supplies	_____
Student Loans	_____		
<b>TOTAL OTHER FUNDS</b>	<b>_____ (B)</b>	<b>TOTAL EDUCATIONAL COSTS</b>	<b>_____ (E)</b>
<b>TOTAL AVAILABLE FUNDS FOR YEAR PRIOR TO MY PERIOD OF STUDY:</b>	<b>\$ _____ (C)</b>	<b>TOTAL EXPENSES FOR YEAR PRIOR TO MY PERIOD OF STUDY:</b>	<b>\$ _____ (F)</b>
(A+B)		(D+E)	

**SAVINGS (C - F) = \_\_\_\_\_**

(Amount by which Income exceeded Expenses)



4. Please list any special circumstances which you believe the Selection Committee should consider when reviewing your application.

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### SECTION V – TRANSCRIPTS AND REFERENCES

**\*\*A TRANSCRIPT OF MARKS IS REQUIRED\*\***

I have included the most recent transcript of my marks:    YES    \_\_\_\_\_    OR  
will follow (prior to May 15, 2019)    \_\_\_\_\_

Letters of reference are recommended as they are beneficial to the determination of your award.

### SECTION VI - APPLICANT'S DECLARATION (signature required)

I HEREBY DECLARE THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE AND THAT THE BURSARY IS ESSENTIAL FOR ME TO CONTINUE MY EDUCATION. I FURTHER DECLARE THAT I AM WILLING TO SUBMIT ALL STATEMENTS FOR INDEPENDENT VERIFICATION AND AUDIT AND THAT I WILL SUBMIT ANY DOCUMENTATION NECESSARY TO SUBSTANTIATE MY CLAIMED EXPENSES.

I declare that I will notify the Public Guardian and Trustee if I do not complete my proposed course of study or training during the period stated.

I understand that attempting to obtain funds by giving fraudulent information is punishable by law under the Criminal Code of Canada.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature