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Staples
Please

JOHN E. ABRA MEMORIAL BURSARY

Application Form

CRITERIA:

- have been a full-time undergraduate student at the University of Manitoba and a St John's College member
- be entering or continuing in a full-time program in **Dentistry, Medicine or Law** in the fall
- preference will be given to a Dentistry student, and preference will be given to a program at the University of Manitoba
- have demonstrated significant financial need
- have achieved a cumulative GPA of 3.0

First Name	Last Name	Student Number
Mailing Address INCLUDE your postal code		
Cell / home phone number	University of Manitoba email address	

Yes I was a full-time undergraduate student at the University of Manitoba and a St John's College member

Fall registration: Full-time Yes No

Dentistry Medicine Law Year in Program: _____ Institution: _____

Application Check List:

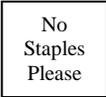
- Complete and sign the application form
- Complete the financial need worksheet
- Include a **single sided one page** letter of application
- Provide confirmation of your registration in the fall if not attending the University of Manitoba
- Include your transcripts from other universities

Declaration: The information in this application is complete and accurate. I consent to full access to my student records. I understand that, if I am selected to receive an award, my name and information about how I meet the award criteria may be given to the award donor and/or donor's family.

Signature _____ Date _____

This personal information is being collected under the authority of The University of Manitoba Act. It will be used to assist in making decisions regarding the awarding of scholarships and awards, and to make information regarding awards public. It is protected by the Protection of Privacy provisions in The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection contact the FIPPA/PHIA Coordinator's Office, University of Manitoba Archives & Special Collections, 331 Elizabeth Dafoe Library, Winnipeg MB R3T 2N2, 204-474-8339.

APPLICATION DEADLINE 4:30 PM, JULY 31st



Financial Need Worksheet

First Name _____ Last Name _____

- 1) If you are married or in a common-law relationship, is your partner a full-time student? a part-time student?
 employed? unemployed?
- 2) Do you have children? Yes No (children's ages) _____ Are you a single parent? Yes No
- 3) Accommodation: Own Rent Campus Residence Parents
- 4) If you own or lease a vehicle what is the Make/Model/Year: _____
- 5) Did you receive a Government Student Loan for the **current** academic year? Yes (amount \$ _____) No
- 6) Will you apply for a Government Student Loan for the **upcoming** academic year? Yes No
(if No to question 5 and/or 6 please provide details in your letter of application International Students Exempt)
- 7) Value of all outstanding student loans, including student lines of credit, you currently hold \$ _____
- 8) Are you an International Student? Yes No

BUDGET FOR THE UPCOMING ACADEMIC YEAR September to April (exception: include summer earnings)

Expenses	Total \$	Resources	Total \$
Tuition		Applicant's Earnings	
Books and Equipment		Spouse's Earnings	
Rent / Mortgage		Government Student Loan / Bursary	
Heating / Electricity / Water		Government Sponsorship	
Phone / Internet / Cable		Assistance from Parent(s)	
Food / Clothing / Hygiene		Savings	
Car (gas, parking, insurance) Bus Pass		RESP / CPP / Pension / Workers Compensation Benefits	
Travel costs to and from home outside Winnipeg (e.g. at beginning and end of term)		Government Support (e.g. Employment & Income Assistance, Child Tax Benefit, GST, Income Tax refund, Band Funding)	
Child care & other expenses for which you are responsible (please provide details in your letter)		Spousal / Child Support / Financial support towards children's expenses listed in the left- hand column	
Debt payment (please provide details in your letter)		Scholarships / Bursaries / Graduate Fellowships	
Recreation		Applicant's Summer Earnings	
Donations		Spouse's Summer Earnings	
Insurance: Medical, Dental, Home			
TOTAL EXPENSES	\$	TOTAL RESOURCES	\$
		DEFICIT (expenses – resources)	\$

In your **one page** letter of application, please include any other expenses, resources, exceptional circumstances that highlight your need for financial assistance. If you are not an International Student please explain the reason why you have not applied/received a Government Student Loan. Your comments can be very helpful in assessing eligibility or special needs.