Ontario Parks Association Foundation
Bursary & Scholarship Application Form

Interested students must include a completed copy of this application form with accompanying required documents outlined in the application check list. The information package must post marked prior to midnight **Friday, April 27, 2012** and be addressed and sent to:

Ontario Parks Association Foundation
Bursary and Scholarship Committee
C/o Ontario Parks Association
7856 5th Line South, RR 4
Milton, Ontario L9T 2X8

NOTE: All of the required documentation as described below must be complete and submitted with your application for evaluation and consideration by the Selection Committee. Incomplete applications will be disqualified. Only successful applicants will be notified on or before the end of July.

1. APPLICANT IDENTIFICATION

Applicant's Name: _____

Phone: _____

Cell Phone: _____

Email: _____

Permanent Address: _____

_____

School Address: _____

_____

Please check if appropriate: ❑ Canadian Citizen or Landed Immigrant

2. EDUCATIONAL INSTITUTION

Title of Program: _____

University / College: _____

By the application deadline of **Friday, April 27, 2012**, I will have completed my first year of a _____ year (state number of years) program.

Number of Courses per Fall Semester: _____

Number of Courses per Winter Semester: _____

Number of Courses per Summer Semester: _____

Overall Average: _____ % or Grade Point Average: _____

All applicants will be evaluated based on the following required criteria by the Selection Committee. The Selection Committee is comprised of a quorum of the Ontario Parks Association Foundation Board. All decisions made by the Selection Committee are considered final.

3. LETTER

Your response to the following will be evaluated and will form the context of your letter. Use the following underlined statements as mandatory headings in your letter to introduce yourself to the Selection Committee.

Outside Interests Related to Your Field of Study – provide background information about yourself that may relate to the academic program you have chosen.

Involvement / Volunteerism in Community and/or Campus Activities – What activities have you been involved in that have helped to improve your community of campus?

Future Involvement In Your Profession – Describe the direction you hope to pursue in your future career and any professional or academic plans you have to achieve your goals.

4. REFERENCE LETTERS

Please provide two letters of reference, dated within the past two years:

i) one non-academic reference
ii) one academic reference

5. CURRENT RESUME

6. TRANSCRIPT

i) If second term grades are not finalized, please submit grades from first term that are final.
ii) Final transcripts can be forwarded after the deadline date to the Selection Committee (see mailing address at top of this application), no later than Friday, May 18, 2012.
iii) Website transcripts are acceptable, provided that the website transcript is accompanied by letter grade or grade point average conversion to percentage grade.

7. COLLECTION OF PERSONAL INFORMATION PRIVACY STATEMENT

The personal information collected in the context of this bursary and scholarship application is for the sole purpose of determining qualified bursary and scholarship award recipients by the Ontario Parks Association Foundation Bursary and Scholarship Selection Committee, wherein after referred to as the "Selection Committee".

a) Be assured that all records pertaining to this application will be reviewed and evaluated in confidence by the Selection Committee. After the decision making meeting only the application records that will be kept will be securely retained in confidence by: the Bursary and Scholarship Chair and the Office Staff of the Ontario Parks Association (OPA), for a period of one year to the day of application, after which time all application records will be shredded in accordance with the Freedom of Information and Protection of Privacy Act.

b) No information collected on this award application can or will be disclosed to any individuals other than the Selection Committee and the Office Staff of the OPA after the decision making meeting, without written consent of the individual applicant.

c) Your personal contact information only will be used solely for the purpose of this application and will not be shared with any other association other than the OPA or company without your written consent.

d) If you wish to receive any of the benefits of OPA membership and an OPA membership renewal notice and/or have your contact information only (name, address, email, phone) forwarded for employment opportunities offered by OPA members only, you are required, under the terms and conditions of the Freedom of Information and Protection of Privacy Act, to sign and complete the **Consent to Release Information Form** and include it in your application package. Complete all or in part accordingly.

If you do not wish to receive any of the benefits of OPA membership and an OPA membership renewal notice and/or have your contact information only (name, address, email, phone) forwarded for potential employment opportunities offered by OPA members only, you are not required to complete this form.

If you have any questions pertaining to the collection of information for the application, please email opaf@ontarioparksassociation.ca.

CONSENT TO RELEASE OF INFORMATION FORM

Ontario Parks Association Membership Information

I _____ (name) consent to have only my personal contact information shared with the Office Staff of the Ontario Parks Association for the sole purpose of receiving the benefits of membership and a membership renewal notice after my complimentary one year award membership has expired, in the event I am a successful award recipient.

In the event I am not chosen as a successful applicant, I still wish to receive membership information when existing memberships are renewed.

I understand that the use of my personal contact information for this purpose will expire after one year of the application deadline and it is my responsibility if I wish to complete the membership application form and submit it to the Ontario Parks Association.

_____ _____
Name Date

Ontario Parks Association Potential Employment Opportunity Information

I _____ (name) consent to have only my personal contact information shared with the Office Staff of the Ontario Parks Association for the sole purpose of forwarding it for employment opportunities offered by OPA members only. Respective interview and hiring processes apply and signing this section does not guarantee employment, but rather provides a potential contact thereof.

I understand that the use of my personal contact information for this purpose will expire after one year of the application deadline and it is my responsibility to personally contact the office staff of the Ontario Parks Association, should I wish to have this extended.

_____ _____
Name Date

If you chose one or both of the options above, please print, sign and date this form and include it in your application package.

If you have any questions pertaining to the collection of information for the application, please contact the office staff of the OPA. The OPA can be contacted at:

Ontario Parks Association
7856 5th Line South, RR 4, Milton, Ontario L9T 2X8
Telephone: (905) 864-6182 Toll Free: 1 (866) 560-7783 Fax: (905) 864-6184
Email: opa@ontarioparksassociation.ca Website: www.ontarioparksassociation.com

BURSARY APPLICANTS

For those seeking a BURSARY, you must also include the following in addition to the criteria above:

1. ONE YEAR OF STUDY BUDGET

Please use the table provided on Page 6 to complete a budget for "One year of Study".

2. BURSARY APPLICATION JUSTIFICATION

On a separate typed page entitled "Bursary Application Justification" provide:

a) A brief description of your personal effort to earn tuition and any financial support you have received,
b) A brief description of your anticipated costs required by your program of study,
c) A closing statement as to why you are a deserving student.

Use the respective check list(s) to ensure that you have completed and have included all the required information and documents.

BURSARY AND SCHOLARSHIP APPLICANT CHECK LIST

Application Section	Criteria Title	Completed and Included
1	Applicant Identification	❑
2	Educational Institution Information	❑
3	Letter	❑
4	Two Reference Letters	❑
5	Current Resume	❑
6	Transcript	❑
7 (optional)	Information Consent Form	❑

BURSARY APPLICANT ADDITIONAL CHECK LIST

Application Section	Criteria Title	Completed and Included
1	One Year of Study Budget	❑
2	Bursary Application Justification	❑

ONE YEAR OF STUDY BUDGET

Expenses		Income / Resources	
Tuition Fees	$	Savings Before Starting School	$
Books and Supplies	$	Parental / Spousal Assistance	$
Rent (One Year)	$	Other Awards / Scholarships / Bursaries	$
Utilities (per month x 12)	$	OSAP / Government Student Loan	$
Food and Supplies (approx.)	$	Part-Time Job Earnings per week x total number of weeks - school related work - off-campus work	 $ $
Personal Items (approx.)	$		
Transportation - Local - Home	 $ $		
		Government Income - Orphan's benefits - Employment Insurance - Pension Income	 $ $ $
Unusual Expenses - Medical - Dental - Other (please specify): _____	 $ $ $	Other (please specify): _____	$
Total Expenses	**$**	**Total Income**	**$**

Total Income – Total Expenses = $ _____