Canadian Charity #83793 7754RR0001

#### JOSEPH MORRISON LEGACY FUND

#### **2014 STUDENT BURSARY**

The **Joseph Morrison Legacy Fund** offers a bursary to Aboriginal students in need who exemplify the values and dedication of the late Justice and Elder Joseph Donald Morrison.

Joseph devoted his life to family, community and nation, promoting cultural understanding and lifelong learning. He encouraged young people along the way to be strong and proud as Aboriginal peoples, to show respect and care for themselves and others.

The bursary, established on Mr. Morrison's passing in 2012, supports Aboriginal youth who have overcome adversity to achieve their goals toward a better life. The generosity of the Ontario Federation of Indigenous Friendship Centres (OFIFC) and other donors makes this award possible from year to year.

The Smith-Morrison family reviews applications and selects the recipients. The awards are publicly announced in October and posted on the Good Life website. One male and one female will be chosen to receive \$1,500 each.

#### **CRITERIA**

# To apply, students must:

- Be First Nations, Metis or Inuit residents of Ontario, age 16 30 years
- Be registered as a returning student in a post-secondary accredited institution
- Have good academic standing (B average)
- Relate how they have met life challenges and kept moving toward their goals
- Have demonstrated financial need.

The deadline to apply for the bursary is September 12th, 2014, with the award being presented to the selected recipients on October 1st, 2014.

### Completed and signed applications can be submitted by email or by mail to:

### Joseph Morrison Legacy Fund

c/o Danielle Morrison 11-626 Jessie Avenue Winnipeg, MB R3M 1A4 Email: josephmorrisonlegacyfund@gmail.com

Phone: 613-709-1562

# JOSEPH MORRISON LEGACY FUND

# **BURSARY APPLICATION FORM**

Please fill out every section of the application form and attach required documents. You may include additional pages for any section as needed. For questions or clarification, contact the Legacy Fund Developer by email through <a href="mailto:josephmorrisonlegacyfund@gmail.com">josephmorrisonlegacyfund@gmail.com</a>.

Α	APPLICANT INDEN	ITIFICATION					
Name		Surname (Family Name)		First Name			
Da	te of Birth						
Gender		Male □ Female □					
An	cestry	First Nation ☐ Métis ☐	l Inuit □	Non-Status □			
Ad	dress	Street Address or P.O. Box					
		City/Town	Province	Postal Code			
Но	me Phone						
Alt	ernate Phone						
Em	ail Address						
Academic Institution		Registered □ To be registered □	University ☐ College ☐ Other ☐ (Indicate):				
Nar	ne of Institution						
Ins	titution Location						
S	pecial consideration is	s given to students pursuing e	ducation in the fo	following fields (select all that apply):			
J	ustice   Social Se	rvices   Community/E	conomic Develop	oment □ Military Service □			
		is also given to students con details of the exchange progra		al and international travel exchange programs. If thi			
	hange Program						
Bri	ef Description						

В	ELIGIBILITY
1. [	Describe your personal, education, and career goals.
2	Describe how you have overcome hardships or challenges to achieve your life goals.
۷.	Describe now you have overcome naruships of challenges to achieve your me goals.
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3.	Indicate your field of study and why you have chosen this field.
	Tell us about your employment history, personal interests, extracurricular activities, volunteer work and
со	mmunity involvement. Attach a resume, CV if you prefer.

C FINANCIAL INFORMATION					
1. If you are receiving other awards, bursaries and/or sc	holarships, list in	the space provided.			
Funding Source & Award Description		Amount			
		\$			
		\$			
		\$			
		\$			
		\$			
	\$				
	Total	\$			
2. List all sources of financial income for the school year in the space provided.					
Income Source		Amount			
Grants and student loans					
Family/friends (including parental and spousal)		\$			
Awards, bursaries and/or scholarships (total amount fron	n #1)	\$			
Personal savings	\$				
Expected employment (if employed during school)		\$			
Other (specify)		\$			
	Total	\$			
3. Provide a breakdown of your expenditures for the	school year using	g the guidelines below. Attach separate			
page if necessary.	1				
Expenditure	Amount				
Tuition	\$				
Books	\$				
Other Fees	\$	<del></del>			
Living Costs	\$				
Residence Fees/Rent	\$	<del></del>			
Meal Plan/Food	\$	<del></del>			
Utilities	\$				
	Other (specify) \$  Travel Costs (if any) \$				
1	\$	<del></del>			
Other (specify)	\$				
Total Synanditures	ć				
Total Expenditures	\$				

### C PROOF OF ACADEMIC STANDING

Attach a photocopy of academic transcripts from your last completed year of school, showing good academic standing (minimum B average).

# D PROOF OF POST-SECONDARY ACCEPTANCE/REGISTRATION

Attach a photocopy of your acceptance letter from the post-secondary institution you are attending, or proof of registration. If acceptance/registration is pending, indicate the date by which you expect to be notified.

Expected Acceptance/Registration Notification Date:

F DECLARATION						
☐ I confirm that the information contained in this application and the accompanying documents are true, accurate and complete.						
Your Name (print)	Signature					
	0.11					
Parent/Guardian's signature (if you are under 18	years of age)					
Parent/Guardian Name (print)	Signature					
	Date					

Attach at least 3 letters of support (excluding family); at least one letter should be an academic reference.

E REFERENCES