

## BURSARY APPLICATION FORM ADULT (OVER 18 YEARS)

DVSA Bursaries are made possible through the generosity of community donors to ensure there are no financial obstacles to attending DVSA classes and workshops. Please apply for a bursary only if there is a financial circumstance that limits your ability to attend.

We strongly encourage those who would like to apply for a bursary to contact DVSA's Executive Director in advance of completing and submitting the application.

## **Bursary application guidelines and tips:**

- Bursaries are available only to those who can demonstrate crucial financial or personal circumstances that limit their ability to attend DVSA.
- Each application must have a letter of reference from someone (i.e. doctor, minister, teacher, social worker, etc.) who can speak to your financial or current situation.
- Be sure to complete the application in full complete the check list on page 2 before submitting.
- Spots in DVSA classes fill up quickly so we suggest that applications should be submitted by the following deadlines to avoid disappointment:
  - o Fall term: on or before August 1
  - Winter term: on or before December 1
  - o Spring term: on or before February 1
  - o Summer term: on or before April 1
- Due to demand and limited resources, DVSA can only accept **1 (one) bursary per student**, within the DVSA fiscal year (July 1st June 30<sup>th</sup>).

Completed applications and supporting documentations should be submitted in confidence by the date above to:

Dundas Valley School of Art 21 Ogilvie Street Dundas, Ontario L9H 2S1

Tel: 905-628-6357 Fax: 905-628-1087

Email: info@dvsa.ca

## **Bursary decisions**

You will receive an email 2-3 weeks after the final due date notifying you of the bursary decision. All bursary decisions are final unless there is new or exceptional information with applicable supporting documentation.



## BURSARY Application Form Adult (over 18 years)

PLEASE ENSURE YOU HAVE READ THE GUIDELINES AND TIPS SECTION BEFORE COMPLETING: PERSONAL INFORMATION OF THE PERSON APPLYING FOR THE BURSARY: Surname: Age: First Name: **CONTACT INFORMATION Email: Home Phone: Cell Phone: Mailing Address:** Street: City: Apt/Unit #: Postal Code: Province: CLASS INFORMATION – WHAT CLASS DO YOU WISH TO APPLY A BURSARY TO? Term: □ Fall  $\Box$  Spring □ Summer **Class Code: Class Name:** Day: Time: **FINANCIAL INFORMATION:** Please provide a copy of the last page of your most recent income tax return (if possible): ☐ Homeowner □ Renting ☐ Living with Extended Family ☐ Other (ex. Community Housing) **PERSONAL STATEMENT** Is there any information you would like DVSA to know around your request for a bursary? Ex.) primary caregiver for partner and living on fixed income.

Are there any special accomm	odations for the stude	ent(s) who would li	ke to come to DVSA? If	YES, please explain.
CHECK LIST				
Before you proceed with submi	tting your application	n. please check the	at the following docum	nentation is attached:
				or, minister, teacher, social worker,
	re their contact detai	•		, , , , , , , , , , , , , , , , , , , ,
☐ A copy of the final	page of your previous	s year's tax filing (i	f possible).	
☐ A copy of governm	ent issued identificat	ion.		
DECLARATION				
I hereby certify that the inform	ation provided on thi	is application is, to	the best of my knowl	edge, true and complete, and I
authorize the release of the inf	ormation contained l	nerein to the appr	opriate Selection Com	nittee.
I understand that if I receive a l	oursary the informati	on, I have provide	d may be subject to ve	rification.
Signature			Date (dd/mm/yy)	
	nitted to protecting persor	nal data. The data collec	ted from this form is for the	specific purpose of awarding a bursary and will
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FOR OFFICE USE ONLY:				
Date Received by DVSA:	□ Granted	□ Declined	Date of Decision:	
FOR OFFICE USE ONLY: Date Received by DVSA: Executive Director's Decision:	□ Granted	□ Declined	Date of Decision: Value of Class:	Ś
FOR OFFICE USE ONLY: Date Received by DVSA:	☐ Granted \$	□ <b>Declined</b>	Date of Decision: Value of Class:	\$