

#### Preface

The Human Services Community Bursary is awarded annually to a youth who has demonstrated resiliency and who is pursuing post-secondary education in the human services field. The bursary is designed to recognize and support students who are committed to making a positive impact in their communities through careers in areas such as social services, healthcare, and education. The bursary is open to the general public.

### Value

Up to two (2) bursaries of \$500 each will be awarded annually.

## **Eligibility Criteria**

- Be between the ages of 17 and 25 years old as of January 1, 2024.
- Be a resident of the district of Cochrane or Timiskaming or have attended secondary school in the district of Cochrane or Timiskaming.
- Be presently enrolled or plan to attend a post-secondary institution or be registered in a recognized specialized program in the human services field for the 2024/2025 academic year.
  - Eligible programs include, but are not limited to Social Service Worker, Child and Youth Care, Early Childhood Education, Personal Support Worker, Mental Health and Addiction Worker, Psychology, Nursing, and other related programs.

## Prerequisite of the Application

- Applicants must submit a written statement which explains how they have demonstrated resilience and how this award will support their educational experience (approximately 500 words in English or French).
  - o If a written text presents a barrier, applicants may submit a video message as an alternative.
- Applicants must also provide proof of acceptance/enrollment into a program in the human services field at a College or University (tuition receipt, proof of enrollment letter, etc.)

#### Other Criteria

- The recipient candidate can only benefit once from this bursary (other applicants may apply again in the future).
- The award must be applied to costs associated with pursuing their chosen program in the human services field for any reasonable purpose such as tuition/registration fees, textbooks or related materials.

### Selection Process

The selection committee is made up of employees of North Eastern Ontario Family and Children's Services (NEOFACS) who were selected by the North Eastern Ontario Children's Foundation. The committee will receive all applications and will evaluate them to select the best candidate according to the established criteria.

The funds will be held in trust for the applicant until proof of acceptance/enrollement from the post-secondary institution is received.

## Application Deadline

Completed applications must be submitted by email to <a href="mailto:foundation@neofacs.org">foundation@neofacs.org</a>, <a href="mailto:no foundation@neofacs.org">no later than Friday, May 31</a>
<a href="mailto:2024">2024</a>, at 4 p.m.

If you have any questions or require the application in an alternative format, please call 705-360-7100 ext. 5217 (Toll-Free: 1-866-229-5437) or email <a href="mailto:foundation@neofacs.org">foundation@neofacs.org</a>.



## **Bursary Application**

The Human Services Community Bursary offers up to two (2) \$500 awards to youth from the district of Cochrane or Timiskaming who are pursuing post-secondary education in the human services field.

Personal Information	
Legal Name:	Chosen Name (if different from legal name):
Personal Pronouns:	Date of Birth:
Address:	
Phone Number:	Email:
Have you applied for OSAP: Yes No	)
If No, please explain why:	
Academic Information	
<b>High School</b> (Currently enrolled in or a graduate of):	
	redited apprenticeship, or training program in the human
services field (Currently enrolled in or planning to pu	rsue):
Name of Post-Secondary Institution:	
Student Number (if applicable):	
Type of Program:	
Certificate Diploma	Degree Graduate Certificate
Co-op Apprenticeship	Other, please explain:
Length of program	Enrolled in which year for the



Human Services Community Bursary that explains how you have demonstrated resilience and how this award will support your educational experience:	



## **Applicant's Declaration and Consent**

I understand that the collection of personal information provided on this application or accompanying		
documentation is used solely for the purpose of determining my eligibility for bursary assistance.		
I understand that I am responsible for providing all required documentation as indicated on this application or as directed by the Foundation. I understand that if I do not submit the required documentation or information I may not be considered for a bursary.		
I declare that all of the information that I have given on this form is true and accurate. If any information is inaccurate, I understand that any bursary awarded may be reassessed and/or withdrawn.		
By checking the box below, I consent to the terms stated above:		
Yes, I consent.		
I would like staff support to review the information with me before providing my consent.		
No, I do not consent and understand that this means my application may not be processed.		
Applicant's Name		
Applicant's Signature		
Date		