



JIBC

Submit to:
Financial Aid Office
Justice Institute of British Columbia
715 McBride Boulevard
New Westminster, BC V3L 5T4
Email: financialaid@jibc.ca
Confidential fax: 604.528.5653

Derm McNulty “Courage to be Curious” Memorial Award

Personal Information

First Name _____ Last Name _____

Gender M F T D.O.B. _____

Apt/Unit/PO Box _____

Address _____

City _____ Postal Code _____

Phone #1 _____ Phone #2 _____

Email _____

JIBC Student # _____ Social Insurance (mandatory) # _____

Aboriginal (circle) First Nations Inuit Métis None
Other: _____

Canadian Citizenship Status _____

Do you have a permanent disability? Y N

Are you a protected person or Convention Refugee? Y N

Academic Information

JIBC Program Name (must be a program of at least 10 credits)

Career Goal _____

Please provide information on your education and training, including degrees, diplomas, certificates, etc.

High School	Name of School:	Level Achieved:
	Date Range Attended:	
	Date Range Attended:	

Personal Statement

Are you seeking a career change? Returning to education after a long break?
Wishing to reinvent yourself? Briefly explain.

Briefly explain how this award will contribute to your personal goals, life transformation and support a “next step” opportunity:

Financial Information

Please itemize your anticipated income and expenses for your period of study, per month. **Married or common-law students must list *entire* household income and expenses.**

INCOME (<u>monthly</u>)	Prior to program start	During program
Work net income	\$	\$
Spouse’s net income	\$	\$
Income from government source (EI, HRDC,etc)	\$	\$
From family/sponsor/employer	\$	\$
Child support/spousal support	\$	\$
Daycare subsidy	\$	\$
Other income (band funding/ investments/interest/etc)	\$	\$
(A) TOTAL MONTHLY INCOME	\$ (A)	\$

Please provide your current income, as of the date of this application. Do not include assets listed above.

INCOME (Current)

Savings after tuition costs	\$
Student loans (family/bank/government)	\$
Grants/Scholarships/Awards/Bursaries	\$
Other (specify) _____	\$
TOTAL CURRENT INCOME	\$

EXPENSES (Monthly)

Rent/Mortgage and Utilities	\$
Food	\$
Transportation	\$
Miscellaneous	\$
Daycare (including subsidy)	\$
Loans/credit payments	\$
Medical/dental premiums	\$
Insurance (car/house/life)	\$
Glasses/contacts	\$
Car repairs	\$
House repairs	\$
Non-refundable medical costs	\$
Other (specify) _____	\$
(B) TOTAL MONTHLY EXPENSES	\$ (B)

Total Monthly Income (A) - Total Monthly Expenses (B) = \$ _____

Are you or will you be living with your parents or a legal guardian during your studies?

If yes, please provide your gross income from all sources in the previous tax year - inside and outside of Canada - below. *Note: If this information is not available, please explain why.*

Additional Information

Which of the following best describes your current situation?

- Single student with **no** dependants
- Married or in a common law relationship with **no** dependants
- Married or in a common law relationship with dependants
- Sole support parent

Number of Dependents _____

Ages of dependant(s) _____

Where will you be residing during your study period?

- With parent(s), **NOT** paying rent or mortgage
- With family, **NOT** paying rent or mortgage
- With spouse or friends, **NOT** paying rent or mortgage
- With parent(s), paying rent or mortgage
- With family, paying rent or mortgage
- With spouse or friends, paying rent or mortgage
- Alone paying rent
- Alone paying mortgage

Which one statement best describes your current residency status?

- I have lived in British Columbia for 12 months or more
- I have lived in British Columbia for less than 12 months
- I am from another Canadian province or territory

*Note: International students do not qualify for this award

Are you currently employed? Yes No

Name of Employer: _____

Hours of work per week: _____

Employment Status: Full-Time Part-Time Contract Other: _____

Are you planning to work during your program of study? Yes No

If yes, how often (# hours/week): _____

Declaration

Any misrepresentation will result in a penalty which could include, but is not limited to, expulsion from my program, ineligibility to be considered for future awards and forfeit any outstanding awards. Furthermore, the JIBC Registration Office maintains the right to withhold grades and official transcripts and to put a notation on my permanent record. I hereby declare that the information given on this application is, to the best of my knowledge, correct and that I have read and understood the directions at the beginning of this application. I authorize the JIBC Registration Office to verify any or all of the above statements if deemed necessary.

I understand that:

1. The JIBC award selection committee appointed will review my application.
2. I must maintain satisfactory completion of courses in my program.

I give permission to the JIBC Registration Office:

1. To use information from my Income Tax Return to verify information on my award application.
2. To consult its own Student Information System for the purpose of ascertaining my academic standing and cumulative credits; also to confirm my status as either part-time or full time and to confirm my field of study.

Signature of Applicant

Date

If you are unable to complete the fillable form, please print and return the completed application, plus any documentation, to the financial aid office.

Student Awards & Financial Aid Office
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Fax: 604.528.5653
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Derm McNulty "Courage to be Curious" Award
Administered by the JIBC Student Services Office