

**/THE GRAND CHAPTER ROYAL ARCH MASONS OF CANADA
IN THE PROVINCE OF ONTARIO**

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APPLICATION FOR BURSARY

District No: _____

Note: This application cannot be considered unless all sections have been completed.

A copy of the previous year's academic record from your current or last learning institution must be included.

1. Applicant's Personal Information			
Name:		Phone:	
Address:			
City:		Province:	Postal Code:
Date of Birth: YY	MM	DD	Marital Status:
			No. of Dependents:

2. Schools Attended In Order with Dates	
A:	C:
B:	D:
Last Grade/Course Passed:	<u>An Academic Record / Transcript must be enclosed with this application</u>
What school do you propose to attend?	
Have you received acceptance from this school?	
What career do you propose to pursue?	

3. Grants, Scholarships, Bursaries, Student Awards or Loans			
If you have received any of the above, please indicate below:			
Name of Organization	Year(s)	Amount	Nature of Award
(a) Have you or will you apply for other financial assistance this year?			
(b) If you replied "yes" to (a) what was the amount received?			
(c) If refused, why?			
(d) Have you previously applied to this committee for assistance?			
(e) If you replied "yes" to (d) did you receive assistance?			How Much?

4. Statement of Income & Expenses			
Student's Estimated Income		Student's Estimated Expenses	
From Parents:		Tuition:	
Loan or Scholarship:		Books & Supplies:	
Earnings from Employment:		Room & Board:	
Other Income:		Recreation:	
		Incidentals:	
Total \$		Total \$	

Please provide any additional information which may be of help in evaluating your application.

I agree and consent to the transmission of the information set out on this form by email or any other electronic means, to members of the Grand Chapter and the Bursary Committee. This transmission will be for administrative purposes only.

Dated at _____

Date _____

Applicant's Signature

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FOR CHAPTER, DISTRICT AND GRAND CHAPTER USE ONLY

The Scribe Ezra must affix the Chapter Seal to this application. All sections must be completed.

5. Applicant's Sponsor

Name:	Phone:	eMail:
Address:		
City:	Province:	Postal Code:
Chapter Name:	Number:	District:
Relationship to Applicant		
Is the Applicant or Sponsor a member in good standing of this Chapter?		

After carefully investigating the Sponsor's membership status with the Chapter

6. Statement of First Principal of the Chapter

First Principal's Signature	Date:
If the applicant is a relative of the First Principal, this application must also be signed by one of the other elected Principals of the Chapter:	Chapter Seal
Additional Signature	
Office: _____ Date: _____	

Grand Chapter Bursary Chairman's Comments

Signature	Title:	Date:	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
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Regulations::

1. Bursaries are given to financially assist needy students from High School entering University or other approved Institutes of learning. Post graduate students are not eligible.
2. Bursaries continue aid from year to year if scholastic attainment justifies further assistance.
3. Applicants can only apply for a bursary once in a twelve (12) month period.
4. Bursary Applications received after January 15th will not be processed until the May.
5. Bursaries shall be awarded at the discretion of the Bursary Committee.
6. Bursaries shall be of such value as determined by the Bursary Committee.
7. The Chapter First Principal is to forward fully completed forms to the Grand Chapter Scholarship & Bursary Chairman.
8. **THE APPLICANT MUST BE RELATED TO A ROYAL ARCH MASON** (See Guidelines for eligibility)