

Open Door Bursary Application

The Open Door Bursary supports low-income youth between the ages of 16-25 who have no other funding options available to them to successfully transition into further education, training or employment. The bursary opens doors to youth who do not meet the eligibility criteria of other bursaries and grants. Examples of eligible requests include funding towards upgrading or certification course tuitions, related textbooks, application fees, supplies for job start, etc.

APPLICATIONS ARE ACCEPTED ON AN ONGOING BASIS

1. Personal Information:

FULL NAME

EMAIL ADDRESS

PREFERRED NAME/PRONOUNS (EX: SHE/HER, HE/HIM, THEY/THEM, ETC.)

GENDER IDENTITY

MAILING ADDRESS (MUST BE A RESIDENT OF CALGARY AND AREA)

CITY, PROVINCE

POSTAL CODE

PHONE NUMBER

DATE OF BIRTH

SOCIAL INSURANCE NUMBER

2. Education Information:

NAME OF LAST ATTENDED SCHOOL

GRADE OR LEVEL OF EDUCATION ATTAINED

3. Requested Amount \$ _____

What will the funds be used for _____

Will you be attending school / taking a course or class: ☐ YES ☐ NO

NAME OF INSTITUTION

COURSE OR CLASS

Are you starting a new job: ☐ YES ☐ NO

START DATE

POSITION

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HAVE YOU PREVIOUSLY RECEIVED A SCHOLARSHIP/BURSARY FROM THE BURNS FUND? ☐ YES ☐ NO

IF YES, IN WHAT YEARS?

PLEASE TELL US WHAT THIS BURSARY WILL ALLOW YOU TO DO:

Suggested Documents: If you do not have the documents suggested below showing your income situation **DO NOT LET THAT BE A BARRIER TO APPLYING**. As indicated, we can discuss your eligibility, including your financial need for the bursary.

- **If living at home**, please include a copy of your parent's (both if applicable) most recent income tax "Notice of Assessment."
- **If living independently**, please supply documents showing your monthly income (paystubs, etc.)
- **If income documents are not available** please contact our office to discuss alternate ways of disclosing your financial situation – Charlotte Chesnut 403 234-9396 ext. 2 or charlotte.chesnut@burnsfund.com

SIGNATURE OF APPLICANT

DATE

BURNS MEMORIAL FUND FOLLOWS LEGISLATED GUIDELINES FOR PRIVACY. BY SIGNING THIS PAGE, YOU GIVE EXPRESSED CONSENT TO BE CONTACTED VIA EMAIL BY THE BURNS MEMORIAL FUND. IF YOU DO NOT WISH TO GIVE YOUR EXPRESSED CONSENT FOR EMAIL CORRESPONDENCE, PLEASE LET US KNOW AT UNSUBSCRIBE@BURNSFUND.COM.

If filling this form out online, please ensure you print and sign this page to complete your application.

PLEASE SUBMIT THIS APPLICATION FORM AND REQUIRED DOCUMENTS (VIA MAIL, EMAIL OR FAX) TO:

Burns Memorial Fund
Kahanoff Centre
1120, 105 12th Avenue SE
Calgary, AB T2G 1A1