



Amber Kotzer Memorial Bursary

DESCRIPTION

Amber Kotzer had a passion for gymnastics. She was a talented gymnast and an encouraging member of the Quesnel Technics Gymnastics Club. Amber passed away from cancer at a young age. A Community Foundation Bursary has been set up in her honor by her family.

RECIPIENT CRITERIA: The successful recipient of the bursary will:

- ♣ Be a member or past member of the Quesnel Technics Gymnastics Club, or the son/daughter of a past member or, a coach or assistant coach of the Quesnel Technics Gymnastics Club
- ♣ Be in your Grade 12-year, plan or be attending post-secondary school or be returning to post-secondary as a mature student or continuing in a program.
- ♣ Preference will be given to the applicant with demonstrated financial need
- ♣ Include a covering letter explaining your career and educational goals.

AMBER KOTZER MEMORIAL BURSARY – Additional information

2025 Value: \$1100

Application Instructions:

- Complete the necessary application form, financial information, and necessary attachments The Foundation reserves the right to not make an Award in the event of receiving no qualified applications.

Application Deadline:

April 30, the recipient will be notified in June.

Completed and signed applications can be submitted:

- By mail to: Quesnel Community Foundation, Box 4158, Quesnel, BC V2J 3J2
- By email to: quesnelcommunityfoundation@gmail.com

Ownership:

The applications will become the property of the Quesnel Community Foundation.

Administration:

The Amber Kotzer Memorial Bursary is administered by the Quesnel Community Foundation. Successful applicants may be interviewed and have the Award presented publicly. Applications with special circumstances will be held in confidence or, upon request, be destroyed.



APPLICANT IDENTIFICATION	
Name	<div style="display: flex; justify-content: space-between;"> <i>Surname (Family Name)</i> <i>First Name</i> </div>
Address	<i>Street Address or PO Box</i>
	<div style="display: flex; justify-content: space-between;"> <i>City/Town</i> <i>Province</i> <i>Postal Code</i> </div>
	<i>If not currently a resident, when did you live in Quesnel? From: To:</i>
Telephone	
Email Address	
EDUCATION-COMPLETED or IN PROGRESS	
Secondary Education	High School Attending or Attended:
	Graduation Date
Post-Secondary Education	School Attending or Attended
	Program of Study
	Start Date
POST SECONDARY SCHOOL YOU PLAN TO ATTEND	
Name of Institution	
Institution Address	
Program of Study	
Intended Start Date	
How many years is the Program?	
Attendance?	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time



REQUIREMENT CHECKLIST

- Two letters of reference or recommendation sent directly to Quesnel Community Foundation or in a sealed envelope with the application
- Budget for upcoming school year (template attached)
- Transcripts from past and current schools
- Personal Resume
- Letter telling about your community and school involvement and educational, career and personal goals. You may be required to do an interview.

If you are the recipient, a copy of acceptance letter or proof of enrolment from school is required

DECLARATION

I confirm that the information contained in this application and the accompanying documents is true, accurate and complete. I have fully disclosed all financial information to the best of my ability. I understand the information contained in this application will be shared solely with the members of the Quesnel Community Foundation Bursary Selection Committee

<i>Your Name</i>	<i>Signature</i>
	<i>Date</i>

Parent/Guardian's Signature (if you are under 18 years of age)

<i>Parent/Guardian Name</i>	<i>Signature</i>
	<i>Date</i>





FINANCIAL INFORMATION – For BURSARY APPLICANTS List income and expenses for the school year.

This Budget covers my study period beginning ___/___/____ (dd/mm/yyyy) and ending ___/___/____ (dd/mm/yyyy)

EXPENSES

Tuition and fees	
Books and supplies	
Other academic expenses (e.g. software, equipment)	
Housing (rent, residence fees, room & board, mortgage)	
Utilities (hydro, gas, telephone)	
Food or meal plan	
Clothing	
Transportation costs	
Other (eg toiletries, entertainment, childcare etc)	
TOTAL EXPENSES	

INCOME

Savings – enter amount you will have at the start of the academic year	
Employment earnings during academic year (estimated)	
Student loans	
Awards - Scholarships and Bursaries you will receive this academic year	
Parental/sponsor contributions, including RESPs (see below ¹)	
Income assistance – welfare, disability assistance you will receive during your school year	
Spousal contribution (if married or common-law - if amount is \$0 explain in your letter)	
Other Income – Worksafe BC, child care subsidy etc.	
TOTAL INCOME	
TOTAL SHORTFALL (Expenses minus Income)	

ASSETS

Motor Vehicles – resale value	
Other – recreational vehicles, property (do not include principal residence), etc	



1

You must include your parents/guardian contribution in the budget if you are financially dependent on your parents as per Student Aid BC guidelines. Parent/guardian contribution is NOT needed if one of the following questions is answered "YES":

- | | | | | |
|---|-----|----|--------------------------|--------------------------|
| Are you married? | YES | NO | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have dependent children? | YES | NO | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you been out of high school 48 months? | YES | NO | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you been Employed for 24 consecutive months? | YES | NO | <input type="checkbox"/> | <input type="checkbox"/> |