



LHTAKO QUESNEL 2024 BC WINTER GAMES YOUTH ATHLETE AWARD

Description

This bursary was established through a legacy donation from the Lhtako Quesnel 2024 BC Winter Games.

Application Deadline:

April 30, successful recipients notified in June.

2025 Value: \$750

To be eligible to apply applicants must:

- Be a student-athlete who is pursuing their chosen sport at the post-secondary level AND/OR
- Have demonstrated athletic achievement at the high school level and are pursuing a sports-related field of study at the post-secondary level, including but not restricted to kinesiology, rehabilitative medicine, athletic training, officiating, coaching, etc.
- Student must be a resident or former resident of Quesnel or North Cariboo.
- Are in their Grade 12-year with School District #28, plan to be, or are enrolled in post-secondary education or,
- are returning to post-secondary education as a mature student or continuing in a post-secondary program.
- Must submit an athletic resume (weighted 25%), essay showing rationale and benefit (weighted 50%), and two (2) letters of recommendation (weighted 25%).
- Have demonstrated financial need.

Completed and signed applications can be submitted:

By mail: Quesnel Community Foundation, Box 4158, Quesnel, BC V2J 3J2

By e-mail to: quesnelcommunityfoundation@gmail.com

Ownership:

The applications will become the property of the Quesnel Community Foundation. Successful applicants may be interviewed by members of the selection committee and have the award presented publicly. Applications with special circumstances will be held in confidence or, upon request, be destroyed.

Administration:

The Lhtako Quesnel 2024 BC Winter Games Bursary is administered by the Quesnel Community Foundation.



LHTAKO QUESNEL 2024 BC WINTER GAMES BURSARY

APPLICATION FORM

Please fill out every section of the application form and attach the required documents. You may include additional pages for any section as needed.

For questions or clarification, contact the Quesnel Community Foundation by email through quesnelcommunityfoundation@gmail.com

APPLICANT IDENTIFICATION	
Name	<i>Surname (Family Name)</i> <i>First Name</i>
Address	<i>Street Address or P.O. Box</i>
	<i>City/Town</i> <i>Province</i> <i>Postal Code</i>
Phone	
Alternate Phone	
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
	Dates:
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
<input type="checkbox"/> Two letters of reference or recommendation sent directly to Quesnel Community Foundation or in a sealed envelope with the application
<input type="checkbox"/> Budget for the upcoming school year (template attached)
<input type="checkbox"/> Transcripts from past and current schools
<input type="checkbox"/> Personal Resume
<input type="checkbox"/> Letter telling about your community and school involvement and educational, career and personal goals and how they relate to athletics or sport related fields
If you are the recipient, a copy of acceptance letter or proof of enrolment from school is required

(Extra Information as needed)	
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DECLARATION	
<input type="checkbox"/> 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 (print)</i>	<i>Signature</i>
	<i>Date</i>
Parent/Guardian's Signature (if you are under 18 years of age)	
<i>Parent/Guardian Name (print)</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 (not covered in rent, phone)	
Food or meal plan	
Clothing	
Transportation costs	
Other (specify – 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 for your study period	
Parental/spousal/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 none explain in your letter)	
Other Income – Worksafe BC, childcare 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”:

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