

GCI Scholarship and Bursaries Information Sheet

Please complete this profile accurately and completely.

Return to the GUIDANCE OFFICE

You are encouraged to update this information throughout this school year.

NAME: _____

COUNSELLOR: _____

EDUCATIONAL INTENTIONS: List the colleges/universities you will be applying to in priority order.

COLLEGE or UNIVERSITY	PROGRAM and/or MAJOR
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

YOUR ACTIVITIES:

1. **HIGH SCHOOL ACTIVITIES:** (music, drama, newspaper, clubs, etc.). Please indicate Leadership (L) or Participant (P).

ACTIVITY	Lead/Part	Describe role	Years
1.			
2.			
3.			
4.			
5.			

a) **HIGH SCHOOL SPORTS:**

SPORT	Lead/Part	Describe role	Years
1.			
2.			
3.			
4.			
5.			

b) **COMMUNITY ACTIVITIES:** (church, clubs, service organizations, sports, etc.)

ACTIVITY	Lead/Part	Describe role	Years
1.			
2.			
3.			
4.			
5.			

over...

YOUR AWARDS: List any Awards that you have received in the school or community.

AWARD	YEAR
1.	
2.	
3.	
4.	
5.	

YOUR WORK EXPERIENCE: (last 4 years)

JOB TITLE	Hours per week?	How long? (months, years)
1.		
2.		
3.		
4.		
5.		

DESCRIBE: Something about yourself that illustrates an issue; that you are passionate about, your career goal or a description of your significant relationships or experiences.

FINANCIAL: The main criterion for receiving a bursary is financial need. If you would like to be considered for any bursaries, please check any relevant personal information.

Economic Factors:

single income household	total income for household < \$40000	siblings in post-secondary studies (# ___) next year
medical or health related issues resulting in reduced income	employment issues	other hardship (please comment below)

Do you intend to apply for OSAP? ___ Yes ___ No

OTHER: Please identify other personal circumstances (i.e. unusual situation, sickness, extra stress) that may be affecting your success.

Names of GCI teachers who know you best: _____

Student's Signature
 GCI: H/Guidance GCI/Scholarship & Bursaries