

# Kinsmen & Kinettes - Serving the Community's Greatest Need

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Application Form Application deadline: February 1, 2016 Online version available at: <u>www.kincanada.ca</u>

**Kin Canada Bursaries** was established in 1994 by Kin Canada as a legacy to its Founder, Harold Allin Rogers, O.C., O.B.E. (1899-1994) and is funded by Kinsmen and Kinettes across Canada. The program was established to promote, encourage and sponsor educational programs and activities, by providing assistance to applicants in their quest for higher learning at a recognized post-secondary institution.

ELIGIBILITY To be eligible you must:

- 1. Be a Canadian citizen or landed immigrant.
- 2. Plan to register as a full-time student in the **2016-2017** school year at a recognized post-secondary institution.
- MAIL this application to <u>one only</u> of a local Kinsmen, Kinette, or Kin Club nearest your permanent residence. (Mailing addresses of Clubs can be found on at <u>www.kincanada.ca</u>)
- 4. Demonstrate high ideals and qualities of citizenship, and
- 5. Not have previously received a bursary from the Hal Rogers Endowment Fund.

## APPLICATION PROCEDURE CHECKLIST:

- Complete the current application form and MAIL TO YOUR NEAREST LOCAL KINSMEN, KINETTE OR KIN CLUB BY FEBRUARY 1<sup>st</sup>. Applications will not be eligible if mailed directly to Kin Canada or if mailed to more than one local Kinsmen, Kinette or Kin Club.
- Attach a photocopy of proof of citizenship (Canadian birth certificate, passport, certificate of citizenship, or Canadian Immigration Record).
- □ You MUST fully complete every section and include your proof of citizenship. (Do not submit resumes or references.)

## NOTES:

- The responsibility for the completed application form rests with the applicant; be sure to answer ALL questions.
- Any information provided may be subject to authentication.
- All information on the application form will be held in the strictest confidence.
- All sponsoring clubs and successful applicants will be notified of the Board of Trustees decision. This decision will be final.

# CLUB USE ONLY

## Club MUST complete this section and send the original application <u>PLUS 6 COPIES</u> (of each page) to: Kin National Headquarters **by <u>MARCH 1<sup>st</sup></u>**.

This application, in the name of		, has been endorsed by the
$\square$ Kinsmen Club; $\square$ Kinette Club; or $\square$ Kin Club of		_ District Zone
and forwarded to Kin Canada Bursaries for consideration by the	Hal Rogers Endowment Fund Board o	of Trustees.
Clubs receiving less than 20 applications must select <u>one</u> to en submit. <b>Total # of applications received</b>	C C	,
<b>IMPORTANT:</b> If the club president is related to the applica	nt then another club officer MUST sig	gn the application form.
President's Name: Signature:		Date: DO NOT approve before February 1 <sup>st</sup> )
Phone (home):	Fax:	
Phone (work/cell):	Email:	
CONTACT INFORMATION WILL BE USED TO NOTIFY YOU IF Y Reminder: Success of the Kin Canada Bursaries program relies on finar		

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Last Name	First	Name and Middle Initial			
Permanent Address		City or Town	Pr	ovince	Postal Code
Phone Number	Applicant E-m	ail address	Parent/G	Parent/Guardian Email Address	
Date of birth (mm/dd/yyyy)		erred Language: French Car	Cit nadian Citizen 🗖	tizenship Stat Landed Imr	
PROPOSED PROGRAM O	F STUDY				
Name of Institution	Location (	City, Province)	Pre	vious HREF B <sub>Yes</sub>	ursary Winner <sub>No</sub>
Expected Starting Date (mm/dd/yyyy)		Which year of study will you b Entering? (1 <sup>st</sup> ,2 <sup>nd</sup> ,etc.)	e Certificat	e / Diploma /	Degree Expected
Program/Area of Study					
EDUCATIONAL HISTORY					
Most recent school or	Grade / Program	Finish Date	Certifica	te/Diploma/I	Degree Complete
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DDITIONAL FINANCIAL CONSIDERATIONS – Are there financial challenges you face of which the selection	committee should be awar
i.e. medical condition/extenuating family circumstances requiring additional finances, single parent, etc.)?	(max. 12 points
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YEAR (s	school, volunteer, etc.)	EXTRA-CURRICULAR, COMMUNITY SERVICE AND VOLUNTEER ACTIVITIES	# of hours
YEAR	POSITION	WORK EXPERIENCE - PLACE OF EMPLOYMENT / JOB DESCRIPTION	Part-time or Full time

#### **KIN KNOWLEDGE**

(max. 20 points)

1) Explain your knowledge of Kin Canada and your local/nearby Kinsmen, Kinette or Kin clubs. Give specific examples.

Kin Canada:

Local Club:

Describe your experience with Kinsmen / Kinette / Kin Clubs 2)

Are you a Kin Member? Tyes INO List any relationships with Kinsmen and/or Kinettes (past or present). 3)

Additional Points may be added based on Overall Quality of Application. Please use this space to add any Additional information related to this Application that you feel is important for consideration by the committee. (max. 10 points)

## Are you interested in learning more information on Kin Canada

YES

NO

## PRIVACY STATEMENT AND APPLICATION AGREEMENT

Personal information under the control of Kin Canada (further known as the Association) and the Hal Rogers Endowment Fund shall remain confidential and shall not, without the consent of the individual to whom it relates, be used by the Association except: (a) for the purpose for which the information was obtained or compiled by the Association; or (b) for a use consistent with that purpose.

By completing and authorizing this Application, you consent to the use of your personal information for: (a) processing of the application; (b) publication of name in the Association's Magazine and Brochure; (c) publication of name in the media; and/or (d) promotional purposes. You also consent to the use of your email address by the association, for the purpose of communication.

I hereby certify that all information is accurate and can be verified upon request; and that I have not been a recipient of this bursary previously. I hereby acknowledge and agree to the above privacy statements and use of my personal information by the Association.

Signature of Applicant

Date of Application

(Or of parent / guardian of applicant is not age of majority)

Questions about the application can be forwarded to the nearest Club or by visiting our website www.kincanada.ca or by calling 1-800-PICK KIN (742-5546) or by E-mailing <u>bursary@kincanada.ca</u>.