

Financial Aid and Awards Office
Justice Institute of British Columbia
715 McBride Boulevard
New Westminster BØ3L 5T4
Email financialaid@jibc.ca

Fax: 604.528.5653

# d ŒŒÇ >ÇBursary

#### PersonaInformation

First name	Last name	
Gender †M †F †T	Date of birth	
Address		
City	Postal code	
Phone	Email	
JBC student ID	Social Insurance #	
Immigration status		
Do you identify yourself as an Indigenous Person of Canada? † Yes † No		
Do you identify as † First Nations	† Métis † Inuit	
Anticipated course start date		
Careergoal		

### AdditionalInformation

Which of the following best describes your current situation?

- † Single student with ndependants
- † Married or in a common law relationship with **de**pendants
- † Married or in a common law relationship with dependants
- † Sole support parent

Number of dependants	
Age of dependant(s)	

Where will you be residing during your study period?

- † With parent(s),NOTpaying rent or mortgage
- † With family, NOTpaying rent or mortgage
- † With spouse or friends\OTpaying rent or mortgage
- † With parent(s), paying rent or mortgage
- † With family, paying rent or mortgage
- † With spouse or friends, paying rent or mortgage
- † Alone paying rent
- † Alone paying mortgage

Are you currently employed? † Yes † No

Ν

### Financia Information

Please itemize your anticipated income and expenses for your period of study, per month. Married or common-law students must list entire household income and expenses.

INCOMEmonthly)	Prior to program start	During program
Work net income	\$	\$
Spouse's net incom	e\$	\$
Income from government source (EI, HRDC, etc.		\$
From family/sponsor/employe	r \$	\$
Child support/spousal suppo	t\$	\$
Daycare subsid	<b>v</b> \$	\$
Other income (band funding investments/interest/etc.)		\$
(A) TOTAL MONTHLY INCO	\$ (A)	\$

Please also provide about any other sources of income, as of the date of this application. Do not include assets listed above.

ı

EXPENSES (Monthly

EXPENSES (Monthly	
Rent/Mortgage and Utilities	\$
Food	\$
Transportation	\$
Miscellaneous	\$
Daycare (including subside	\$
Loans/credit payments	\$
Medical/dental premiums	\$
Insurance (car/house/life	\$
Glasses/contacts	\$
Car repairs	\$
House repairs	\$
Non-refundable medical cost	\$
Other (specify)	\$
(B) TOTALMONTHLYEXPENSE	\$ (B)

Total Monthly Income (A) -Total Monthly Expenses(B) = \$\_\_\_\_\_

## PersonaStatement

Please describenty exceptional incumstances that impact your baility to finance your studies and share how this award will help you. For example, exceptional medial expenses, child care expenses or paying feets fitting the strength of the