Professor John Warkentin is among the best-known and most widely respected Geographers in Canada. This award, named in his honour, is sponsored by the Department of Geography, Faculty of Liberal Arts & Professional Studies

## Criteria

This bursary is awarded annually to an undergraduate student who meets the following criteria:

- A high grade point average in their first two years of study in Geography 2 Participation in Undergraduate Activities
- Ontario resident
- Canadian citizen/permanent resident
- Demonstrable financial need

### Award Value

\$950.00

## HOW TO APPLY

Complete the application form and return to

The Chair Department of Geography N418 Ross Building

#### **Protection of Privacy:**

- Personal information in connection with this application is collected under the authority of Freedom of Information and Protection of Privacy Act and The York University Act, 1965.
- This information is used to process your application and decide on your eligibility.
- Once an award has been granted, York University may disclose certain information to the donor of the award, provincial funding organizations and/or York University academic departments/Faculties and Colleges, as set out below.
- If you have any questions about the collection of this information by York University, please contact: Information and Privacy Coordinator, York University, Ross N926, 4700 Keele Steet, Toronto, ON M3J 1P3, tel. 416-736-2100.

# liberal arts & professional studies



Please answer all questions in ink. Incomplete forms CANNOT be processed.

Mr /Ms /Miss (circle one)	Surname			First Name	e	
Student Numbe	er		Social Inst	Social Insurance Number		
Address	Number	Street			Aparta	ment
City/Town		Province			Postal Code (must be	completed)
Telephone (	)		E-mail			
Marital Status:	☐ Married	□ Single	Common-Law			
No. of Depend	ants		Age(s) of	Dependant(	s)	
Are you residir	ng with your pa	arent(s) during th	e current academic se	ession?	□ Yes	□ No
Faculty			Major			
OSAP AND R	ESIDENCY					
Have you appli	ied for OSAP f	or the current ac	ademic session?	] Yes	🗆 No	
If not, please e	xplain why: _					
Are you a Car □ Yes □ N		, permanent res	sident of Canada (la	nded immig	grant), or have	e protected person status?

### Please check the ONE statement that best describes your current situation:

You have always resided in Ontario; or Ontario is the last province you resided in for 12 consecutive months without being a full-time postsecondary student.

Vour partner has always resided in Ontario; or Ontario is the last province your partner resided in for 12 consecutive months without being a full-time postsecondary student.

Ontario is the last province your parent(s), step-parent, legal guardian, or official sponsor(s) has resided in for 12 consecutive months.

None of the above. Please explain: \_\_\_\_\_

# **BUDGET FORM**

Student Number:		Social Insurance Number:		
Study Period Start Date:	Study Period End Date:			
Total # of Months o	f Study for tl	he Fall/Winter Session:		
If Single Father's gross annual income \$		If Married/Common-Law Spouse's gross annual income \$		
Mother's gross annual income \$				
FINANCIAL RESOURCES		<b>ESTIMATED EXPENSES</b> (If sharing, indicate your portion only)		
	penses for the p	period of time that you are attending fall and winter c	lasses.	
Savings – summer & previous	\$	Tuition	\$	
Parental/ Spousal Contribution	\$	Books/Supplies	\$	
Part Time monthly income \$ x months	\$	Residence/Rent \$ x months	\$	
Scholarships/Bursaries	\$	Utilities \$ x months	\$	
Government Income \$ x months (e.g. UIC, Family Benefits, Indian Affairs, VRS, CPP, Child Tax Benefit)	\$	Phone \$ x months	\$	
OSAP for Fall/Winter session* Canada Student Loan	\$	Cable \$x months	\$	
Ontario Student Loan	\$	Food \$x months	\$	
Canada Study Grant	\$	Personal Care Products (e.g. shampoo, toothpaste) \$x months	\$	
Canada Part-time Student Loan	\$	Childcare \$ x months	\$	
Child Care Bursary	\$	Transportation \$ x months	\$	
Study Opportunity Grant	\$	Car (i.e. gas, insurance, repairs) \$x months	\$	
Other Loans	\$	Car Loan \$ x months	\$	
Other Resources (must specify):	\$	Minimum Credit Card Payment(s) \$ x months	\$	
	\$	YFS Health Care (if applicable)	\$	
	\$	York University Parking		
	\$	Other Expenses (Must Specify)	\$	
			\$	
			\$ \$	
TOTAL	\$	ΤΩΤΑΙ	\$	
IUIAL	Ф	TOTAL	Ф	

\* Please indicate the total assessment for both Canada & Ontario.

### WRITTEN STATEMENT

If there are any extenuating circumstances which have affected your ability to fund your expenses, please provide a brief explanation in the space below. Please do not exceed the space provided below. Attach supporting documentation where possible (e.g. doctor's note)


I have read and agree to the following:

- The information provided on this application is **complete and accurate**.
- That all information provide in connection with this application is subject to verification by the University.
- That any funds I receive will be applied to my student account at York.
- To allow my name, address and biographical date to be released to the donor and to be used in any publication associated with this bursary.

SIGNATURE		DATE	
All applications mus	st have an original signa	ure.	
Office Use Only: Initials: Comments	_ Date:	Bursary Amount	-