

*Mission:*

*"To contribute to the success and development of Fleming College through financial assistance to students and support for College capital needs."*

***JOHN WALLACE SCOTT LLB MEMORIAL SCHOLARSHIP***  
***Student Application Form – 2011/12***

**Who provides this scholarship fund?**

John Wallace Scott (1950 - 1999) was a loved husband, grandson, son, brother, uncle and friend. Beyond all other characteristics, John was a scholar of note with degrees from Trent University, University of Windsor and the University of Toronto where he received his Bachelor of Letters of Law (LLB). This fund was established by family and friends to recognize John's characteristics, specifically his pride for his high school, Lindsay Collegiate and Vocational Institute, his compassion and caring for individuals and his intellect and academic achievements. .

**Who is eligible for this Scholarship?**

This Scholarship will be awarded to a student applicant who:

- has resided in Ontario for twelve months prior to beginning their post-secondary studies
- is a member of the graduating class of Lindsay Collegiate and Vocational Institute in the year the award is presented
- in September, is entering their first year of any full-time program at Fleming College
- demonstrates a financial need in order to undertake his/ her studies.
- has achieved a high academic standing in their final year at LCVI

**What is the value of this Scholarship?**

This scholarship is worth \$1000.00.

**When is this Scholarship awarded?**

If you are successful, this scholarship will be paid to you by cheque at the graduation ceremonies of Lindsay Collegiate and Vocational Institute.

Your completed application form must be received by the  
Fleming College Foundation office  
No later than: **June 1, 2011**





**Section 5: Financial Information:** Please complete the budget form below and where indicated please note if you have or have not applied for the various sources of funding for the 2011-12 academic year.

<b><u>Liabilities:</u></b>	<b><u>Balance Owng</u></b>	
Bank Loan	_____	
Student Line of Credit	_____	
Other Personal Loan	_____	
Previous OSAP	_____	
Credit Card	_____	
<b><u>Assets:</u></b>	<b><u>Total Value</u></b>	
Bank Account Balance	_____	
Investments (GIC, bonds, etc.)	_____	
Other assets (Please specify): _____	_____	
<b><u>Income for Current Academic Year (8 Month Period)</u></b>	<b><u>Total Value</u></b>	<b><u>Applied For</u></b>
OSAP Total (loans/grants)	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Scholarships and Bursaries	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Parental / Family Contribution / Support Payments	_____	
Employment Income while in school (\$/month x 8 months)	_____	
Registered Education Savings Plan (RESP)	_____	
Savings towards current year's expenses	_____	
Other income (Please specify): _____	_____	
	<b>Total Income:</b>	_____
<b><u>Expenses for Current Academic Year (8 Month Period)</u></b>	<b><u>Total Value</u></b>	
Tuition & Ancillary Fees	_____	
Textbooks & Supplies	_____	
Rent (\$/Month = _____ )	_____	
Groceries (Number of People _____ )	_____	
Support Payments (Number of Children _____ )	_____	
Childcare Costs	_____	
Utilities	_____	
Laundry	_____	
Transportation Bus	_____	
Transportation Car	_____	
Insurance (Car etc.)	_____	
Internet Service	_____	
Entertainment / Personal Items / Clothing	_____	
Medical Expenses	_____	
	<b>Total Expenses:</b>	_____



**Section 8: Authorization for Release of Personal Information**

**Pursuant** to sections 21(1) and 42 of the Freedom of Information and Protection of Privacy Act, I authorize Fleming College to release the following personal information to the person(s) or organizations(s) listed below.

This will, in addition, authorize the persons or organizations listed below to collect such information.

This authorization will remain in effect for the following time period: **April 1, 2011 to April 1, 2012**

Personal information to be released:

**Confirmation of my pre-post secondary residency status as required by OSOTF and OTSS bursaries.**

This information is to be released to: **The Research & Stewardship Officer and Foundation Awards Selection Committee, Fleming College Foundation – (705) 749-5530 ext 1339**

I have read and completed the bursary application and confirm that the information provided is correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Student Number

**May we contact you, if necessary, to discuss your application further?**

*Please check one:*    YES        NO

**IMPORTANT:**        *YOUR APPLICATION FORM MUST BE SIGNED AND DATED IN THE SPACE PROVIDED ABOVE.*

PLEASE MAIL **YOUR COMPLETED APPLICATION** (including reference letters and any other information) TO:

John Wallace Scott LLB Memorial Scholarship  
The Fleming College Foundation  
599 Brealey Drive,  
Peterborough, Ontario K9J 7B1

Or Fax:        (705) 749-9776

***WE WISH TO THANK ALL APPLICANTS FOR THEIR INTEREST.  
HOWEVER, ONLY SUCCESSFUL APPLICANTS WILL BE CONTACTED.***