Instructions:
1. All sections must be fully completed in order for your application to be considered.
2. Students must demonstrate financial need in order to be eligible for bursary assistance.
3. The college, university or trade school must be located in Ontario.
4. Please attach copy of proof of enrollment.
5. The application deadline is October 15th.
6. Include PDFs, scanned document files, Word files or photo images of application pages and attachments.
7. Submit completed applications no later than the application deadline to: josephpoitrasmetisbursary@gmail.com.
8. The bursary is based on financial need to cover unmet educational costs. It does not have to be paid back, but it is considered taxable income.

Checklist:
- Section 1 Personal Information Completed
- Section 2 Eligibility Completed
- Section 3 Oshawa and Durham Region Métis Connection Completed
- Section 4 Essay Completed and Attached
- Section 5 Funding Details Completed
- Section 6 Student Waiver and Consent Signed and Dated
- Proof of Enrollment Attached
- School Year Budget Completed and Attached

* Preference will be given to applicants connected to ODRMC but does not preclude consideration of others.

For further bursary information, and contact information please go to Click this link

Bursary recipients will be contacted by November 30th. Selection will be based on eligibility and content of the completed application. Thank you for applying and good luck with your studies.
Application

Section 1 - Personal Information

Full Name: ___________________________________________ Date:________________________
  Last  First  M.I.

Address: ___________________________________________ Apartment/Unit #
  Street Address

  City
  Province
  Postal Code

Age: _______  Phone: ___________________________ Email: ______________________________

Are you currently enrolled in High School?
  ☐ Yes  ☐ No

Are you currently enrolled in Post-Secondary education (University, College, Trade)?
  ☐ Yes  ☐ No

What is your highest completed level of Education?
Year _______  Level _______

Have you been away from formal education for two years or more?
  ☐ Yes  ☐ No

Section 2 - Eligibility

Are you a Métis Nation of Ontario Citizen?
  ☐ Yes  ☐ No  If Yes, provide MNO Card Number # ________________

If No, please read and sign below if you agree with the following statements:
  ☐ I self-identify as Métis
  ☐ I reside in the Province of Ontario
  ☐ I am not registered as an Indian under the Indian Act or as an Inuk on an Inuit registry

Signature ________________________________
Section 3 - Oshawa and Durham Region Métis Connection

Please describe your connection to the Oshawa and Durham Region Métis Community.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Section 4 - Essay

Attach an essay providing details on the topics below (maximum 500 words).

1. Describe how your studies will contribute to your future employment/employability.
2. Why you should be chosen to receive this bursary.

Section 5 - Funding Details

☐ University
☐ College
☐ Trade School

Institution Name ________________________________

Please attach proof of enrollment.

Section 6 - Student Waiver and Consent

I certify that the information I have provided in my application for the Joseph Poitras Bursary is true and complete to the best of my knowledge and belief. I understand that any false or misleading statements will disqualify me from being eligible for this bursary, and may result in the repayment of any bursary payment received. I consent to the use of my name, photo, and application content for the purpose of reporting, advertising, and promotion of the Joseph Poitras Bursary without further compensation.

Privacy and confidentiality Policy and Authorization for use of information: This information is used to determine program eligibility. The Oshawa and Durham Region Métis Council may disclose such information where we are legally authorized to do so. All information collected will be kept strictly confidential and will be protected.

Signature: ________________________________ Date: ____________________
# School Year Budget

This budget is based on the following study period:

- **Start Date:** _____/_____/_____
- **End Date:** _____/_____/_____

### RESOURCES

<table>
<thead>
<tr>
<th>Resource Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bank balance at beginning of term including savings from work-term</td>
<td>$</td>
</tr>
<tr>
<td>Parental contribution</td>
<td>$</td>
</tr>
<tr>
<td>Spouse's net income $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Academic awards</td>
<td>$</td>
</tr>
<tr>
<td>Total OSAP</td>
<td>$</td>
</tr>
<tr>
<td>Net part-time earnings</td>
<td>$</td>
</tr>
<tr>
<td>Other income: (Ontario Works, ODSP, Child Tax Benefit, etc.)</td>
<td>$</td>
</tr>
<tr>
<td>Other Métis funding (MNOET, etc.)</td>
<td>$</td>
</tr>
<tr>
<td>Support Payments</td>
<td>$</td>
</tr>
<tr>
<td>Gifts</td>
<td>$</td>
</tr>
<tr>
<td>Investment income</td>
<td>$</td>
</tr>
<tr>
<td>Other resources: (please specify)</td>
<td>$</td>
</tr>
<tr>
<td>TOTAL RESOURCES FOR SCHOOL TERM</td>
<td>$</td>
</tr>
</tbody>
</table>

### EXPENSES

<table>
<thead>
<tr>
<th>Expense Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and compulsory fees</td>
<td>$</td>
</tr>
<tr>
<td>Books/supplies/instruments/tools</td>
<td>$</td>
</tr>
<tr>
<td>Transportation: local and home</td>
<td>$</td>
</tr>
<tr>
<td>Rent: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Utilities: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Phone: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Food: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Personal Hygiene: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Child care</td>
<td>$</td>
</tr>
<tr>
<td>Clothing</td>
<td>$</td>
</tr>
<tr>
<td>Laundry: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Entertainment: $__________ x ________ months</td>
<td>$</td>
</tr>
<tr>
<td>Uninsured medical/dental (Receipts required)</td>
<td>$</td>
</tr>
<tr>
<td>TOTAL EDUCATION EXPENSES</td>
<td>$</td>
</tr>
</tbody>
</table>

### Financial Assistance Needed

(Resource minus Expenses) $____________

### Declaration:

I declare that the information provided on this application is accurate and a true statement of my financial position.

**Student Signature:** ________________________________  **Date:** ________________