

Financial Need Supplement - Post Secondary

Student Name:	
Scholarship / Bursary Name:	
Parent(s) Name(s):	
Anticipated cost of first year of post secondary education:	
Tuition	\$
Books	\$
Accommodation	\$
Transportation	\$
Other	\$
Total	\$

- a) To what extent are your parents **able** and **willing** to assist you?

- b) To what extent have you contributed to your own educational and/or living expenses during Grades 11 and 12?

- c) To what extent do you expect to contribute to your own educational and/or living expenses during your post secondary education?

- d) Please provide any additional information which may help the Scholarship Committee determine the extent of your financial need.

Student Signature

Parent Signature