2024 - 2025 **Need Based Award Retention Application**

DEADLINE DATE: JULY 19, 2024

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Personal Data:					ı		
Last Name		First Name			Student Number		
Home Address City / Province		Province	Postal Code			Telephone Number	
Name of Continuing Award(s) you are applying for:		olying for:	UWO Email Address:				
Citizenship: □Canadiar □Other (sp	n citizen □Perman pecify):			Home Province:		pecify):	
Status for 2023/2024:	Full-time		Faculty/Program in 2023/2024: Year of Program 2023/20			Program 2023/2024:	
□Part-time			Faculty/Program in 2024/2025:			Year of	Program 2024/2025:
2023/2024 academic year Average: %	2023/2024 acade Medical/Dentistry students(circle one) Pass / Fail	stry □Single □Common-Law □ one):					
parent must be included pouse's Information. If ncome, enter "0". Spou	your spouse is une	employed, i	nclude	income from Gov	ernment (if	applicable).	If your Spouse has no
Number of people in your family, including yourself (parents and siblings):		Number of dependents attending a post-secondary institution in 2024/2025, including yourself:					
Mother's Occupation:	Mother's Gross for 2023 Taxati (Line 15000):			Deductions (Line & 31000):	El Deduc 31200):	ctions (Line	Income Tax Deductions (Line 43500):
Self Employed: Yes □ No □							
Father's Occupation:	Father's Gross i for 2023 Taxatio (Line 15000):			Deductions (Line & 31000):	El Deduc 31200):	ctions (Line	Income Tax Deductions (Line 43500):
Self Employed: Yes □ No □							
Spouse's Occupation:	Spouse's Gross for 2023 Taxatio (Line 15000):			Deductions (Line & 31000):	El Deduc 31200):	ctions (Line	Income Tax Deductions (Line 43500):
Self Employed:							

It is essential that you make full and accurate disclosure of all relevant information about your resources and program costs. Failure to do so may result in sanctions under the Code of Student Conduct. If you have any questions about what information should be disclosed, you should contact the Registrar's Office before submitting your application. Enter 0 (zero) for any field below that is not applicable to your situation.

Student Assets (enter \$0 if not applicable):

Yes □ No □

Amount in Accounts (savings, chequing etc (Balance of savings as of June 30, 2024. Do not include amount of Summer Savings – this will be considered below):				
Amount of Investments (e.g. GIC's, Stocks, Bonds, TFSA, Bitcoin etc):	Amount of RRSPs (Registered Retirement Savings Plan): Amount of RESPs (Registered Educational Savings Plan) to be used for academic year 2024-2025:			

Do you have a vehicle (including lease) ☐ Yes ☐ No	If yes, make and year:	If yes, Cu	rrent Gross marke	t Value of Vehicle:	
*If you have a vehicle not owned/leased by you but you are the primary driver the answer to above question is Yes. Do you own a house? No, I rent Yes Mortgage Owing:\$	If yes, value (based on most current Property Assessment):	Address:			
Financial Resources (enter \$0 if Are you applying for Government Stu		mic year	Yes □	No □	
Estimate* of 2024/2025 Government	loans (OSAP, Out of Province)		\$		
Parental/family Contribution (ie. Rent payments, etc)	payments, groceries, utilities, tuition		\$		
Anticipated UWO Scholarships & aw	ards (include the awards you are app	olying for)	\$		
Anticipated Non-UWO Scholarships awards/scholarships/sponsorships)	& awards (external		\$		
Spouse's contribution			\$		
Windsor medical students: What a you receiving from Windsor?	amount of funding (scholarships, burs	saries) are	\$		
Gross Income from Summer Employ	ment		\$		
Net Income from Summer Employme	ent		\$		
Estimated Summer Savings		\$			
Personal line of credit/Student Bank	Loans (available for the 24/25 acade	mic year)	\$		
Other Government Income (eg. UC,	CPP)		\$		
Other expected income (specify sour	, ,		\$		
*An estimate of Canada Student Loar Previous Educational Related De Do you currently have an outstandir	ebt: ng bank loan or line of credit, relating	to your edu	cation?	yeb/enterapp/enter.xntm ☐ Yes ☐ No	
If yes, how much in interest payment What is the outstanding not repaid				\$	
include amounts to be used for 2024	/2025 academic year)		,	\$	
What is the outstanding amount bor 2024/2025 academic year)	rowed from banks? (DO NOT include	e amounts to	o be used for	\$	
Please describe how you are spe	ending your 2024 summer:				
If Parental/Spousal contribution is \$0 a explain: If estimated summer earnings is listed					
	as 50, explain				

Please describe: How has this scholarship assisted you and how will it co	ntinue to assist you?
Declaration - I have read and agree to the following: 1. The information provided on this application is complete and accurate and I restudies at Western University (herein, Western).	equire additional funds to pursue my
2. I consent to the use of personal information provided on this application or ac my social insurance number, for the purpose of determining my eligibility for final	
3. All information provided in connection with this application is subject to audit a to the disclosure of information on this application to the Ministry of Training, Co source when necessary for audit and verification of the information provided. Delater date based on an audit.	lleges and Universities and any other
4. If any information is found to be untrue, I agree to pay back any funds I have application.	received as a result of this
5. The value of any bursary or award I receive will be applied to my student according	ount.
6. <u>Financial Aid Profile Privacy Notice and Declaration</u> The information on this form is collected under the authority of the <i>University of</i> amended, and is needed to process your application, and decide your eligibility based awards. The Office of the Registrar may disclose designated information addition, the Office of the Registrar may disclose to the award donor, who may associated with the bursary/award, and share with the appropriate Faculty, Dept following student personal information: name, address, biographical data, faculty information that confirms eligibility for and receipt of a bursary or award. This information the prepared for donors and potential donors that lists recipients of donor bursaries. If you have any questions or concerns about the collection, uses, and University, please contact the Office of the Registrar, Western Student Services University, London, ON, N6A 3K7, Tel: 519-661-2111, extension 87399.	for Work Study, bursaries and need- to government funding agencies. In use your information in publications artment(s), and School(s) the y, academic programs, and any other ormation may also be published in a r-funded scholarships, awards, and I disclosure of this information by the
7. I understand that if any information is found to be untrue or inaccurate, this appeared and any money received as a result will have to be returned. If additing sponsorships, external awards/scholarships, service medical agreements) becoming signed, you must disclose the information to our office during the application proprecipient of this scholarship.	onal financial resources (eg. me available after this application is
Date	Signature

DEADLINE DATE: JULY 19, 2024

Questions: Norma Merino

nmerino@uwo.ca

Submit complete application on-line via The DocDrop at

https://studentservices.uwo.ca/secure/oneexperience/docdrop