

FOUNDATION TRADES - RICK JACKSON SCHOLARSHIP APPLICATION FORM

The Rick Jackson Fund, held at the Comox Valley Community Foundation, was established to support the educational pathways of Comox Valley high school graduates through annual scholarships. Please complete and submit this form and documents to your high school before the deadline to be considered.

Deadline: March 2, 2025

1. To be eligible for this scholarship, applicants must be:
 - a. A Canadian citizen or permanent resident of Canada
 - b. A student graduating from School District No. 71
 - c. Pursuing Foundation trades training toward Red Seal certification at any public post-secondary institution in Canada, including locally in the Comox Valley.
2. Attach a current copy of your transcripts.
3. Two signed letters of reference (from non-relatives) must be included

Consideration for this scholarship will be given to applicants with demonstrated financial need, higher grades, those underrepresented in their field of study, and individuals involved in extra-curricular or community programs. Please complete all areas of the application fully to the best of your ability. There are no wrong answers. Thank you for applying!

APPLICANT

Name (First/Last):

Preferred name:

Email Address:

Phone number:

Address:

High school name:

Are you a Canadian Citizen or Permanent Resident of Canada? Yes No

Have you included letters of reference? Yes No

Have you included a copy of your high school transcripts? Yes No

What is your current grade point average? _____

AREA OF STUDY

In this section, please tell us about your educational and career goals. Eligible programs include the 48 Red Seal trade programs as defined and listed by <http://skilledtradesbc.ca>. These start with a Foundation year and include up to three apprenticeship technical training levels with the intention of Red Seal completion.

Planned trade (Foundation to Red Seal):

Name of intended post-secondary institution:

Please tell us about your chosen program, what you're looking forward to learning, and the career you hope to pursue after completing:

ABOUT YOU

In this section, please tell us about some of your interests, hobbies, achievements, or experiences. If you participate in scheduled extra-curricular activities or community programs, you can list them here. You can also tell us about any other interests or ways you like to spend your time.



HOUSEHOLD INFORMATION

This section helps reviewers better understand your financial circumstances and living situation. This information will only be used for the purpose of evaluating financial need. Please only report on your primary residence – where you have lived most of the time during this school year.

1. Please describe your current living situation, including guardians and siblings you live with:
Example, I live with my mom, step-dad and two siblings and stay with my dad every second weekend. Or another example, I live with both my parents and am an only child.

2. Please provide the following information for each parent/guardian that you live with in your primary household:

Parent/guardian 1

Line 150 from previous tax year: _____

What is their occupation: _____

Parent/guardian/step-parent 2 (or leave blank if only one adult lives with you in your primary household):

Line 150 from previous tax year: _____

What is their occupation: _____

3. Is there any information about your family's situation that is not captured in the questions above that you wish to provide? *For example, has the family experienced a significant drop in income since last year (e.g., job loss or reduced work hours)? Are there other family members attending post-secondary education? Are there extraordinary expenses impacting the family's ability to contribute (e.g., legal fees, caregiving costs)?*



FINANCIAL NEED

In this section, please estimate your income and expenses during your first year of post-secondary.

My Income during first year of post-secondary

Savings / contributions (your own and from others) \$ _____

Income from student loans \$ _____

Other income from bursaries / scholarships \$ _____

Anticipated income (work, savings from now until start of program) \$ _____

TOTAL INCOME (add all amounts) A = \$ _____

My Expenses during first year of post-secondary

Tuition & fees (student services, insurance) \$ _____

Room, board and utilities \$ _____

Books & supplies \$ _____

Clothing \$ _____

Transportation \$ _____

Entertainment \$ _____

Miscellaneous \$ _____

TOTAL EXPENSES (add all amounts) B = \$ _____

INCOME MINUS EXPENSES A - B = \$ _____

What challenges do you face in funding your university / college education, and how would this scholarship help you address those challenges?



OPTIONAL INFORMATION

This award seeks to recognize and remove barriers to education and support equity, diversity, and inclusion. As such, responding to the following question is optional but helps to recognize those who are “underrepresented”.

Please mark all that apply to you:

- I am the first in my family to attend college or university
- I self-identify as black, indigenous or a person of colour
- I am/have been in foster care and/or have a court-appointed guardian
- I self-identify as a member of the 2SLGBTQI+ community
- I have a documented disability or chronic health condition
- I am an immigrant to Canada
- English is not my first language

Any responses provided are strictly confidential and only reviewed by the scholarship adjudicators. Reference: Admissions Policies and Practices for Underrepresented Groups of Students www.bccat.ca/underrepresentedgroups

Comox Valley Community Foundation – Privacy and Information Use Statement

All information collected through this application is protected under the *Freedom of Information and Protection of Privacy Act* (FOIPPA). The personal data provided will be used solely for the purpose of adjudicating awards at the Comox Valley Community Foundation (CVCF).

The Comox Valley Community Foundation is committed to maintaining the confidentiality and security of all application information. Your data will not be shared, sold, or used for any purpose beyond the adjudication and administration of the awards.

All application data will be securely stored and subsequently destroyed within one calendar year of submission, in accordance with privacy regulations and organizational policy.

By signing this document, you confirm that you have read, understood, and agree to these terms of use.

Applicant Name: _____

Signature: _____

Date: _____

For Internal use only

