



MCAF Scholarship Application

CHECK LIST

Note: Complete this checklist to ensure that your application includes all the required documents. Incomplete applications will not be considered.

- Application Form with **every area filled in as requested**
- Copy of the previous year's income tax return for you, your spouse, for your mother and father if living in same household (Canada Revenue Agency Notice of Assessment / **Notice Details** showing line 236)
- Transcript of highest level of education
- Written confirmation of your **acceptance or enrollment** in the program
- Two letters of reference (one of which should ideally comment on your academic interests and achievements). **Must be signed unless on an official letterhead.**

Please submit the completed forms and other documentation to:

Multicultural Association of Fredericton Inc.
28 Saunders Street
Fredericton, NB E3B 1N1

Tel : 506-454-8292
Email : mcaf@mcaf.nb.ca
Website : www.mcaf.nb.ca

Please read the whole application before beginning!

Important Guidelines

- Applicants must have moved to Canada as an immigrant or refugee within the past 10 years from the date of application, and normally hold permanent residency or Canadian citizenship status.
- International students are not eligible.
- Applicants must fully complete the application form and attend an interview if requested.
- Applicants must be registered at an approved post-secondary educational institution in New Brunswick and provide proof of acceptance/enrollment.
- Financial need is established by way of an income assessment.
- Applicant must live in the Greater Fredericton area.
- **You can receive the scholarship only once.**

Process

- Info sessions & assistance to complete the application will be held @ MCAF during:
 - December Christmas Break
 - March Break
 - In May
 (times & location will be posted on the MCAF website & FB, and Children & Youth FB)
- **Deadline for submissions is June 30th**
- Final decisions on awards will be made **before the end of July**. Only successful applicants will be notified.
- Incomplete applications will not be accepted.
- Decisions of the committee are final.

Identifying Information

Please complete shaded areas

Name:			
	Last	First	Middle
Date of birth:			
	YY/MM/DD		
Address:			
	Street Address	Apartment/Unit Number	
			NB
	City/Town		Postal Code
E-mail address:			
Phone:			
	Cell	Home or other contact	
Immigration status upon entry to Canada:	<input type="checkbox"/> Government Assisted Refugee		<input type="checkbox"/> Provincial Nominee
	<input type="checkbox"/> Work Permit Holder family		
Date you landed in Canada:			
	YY/MM/DD		

Education

Please complete shaded areas

Highest level of education achieved to date:	
Enclose your transcript from your highest level of education. If you are unable, describe why:	
Academic institution you will be attending:	
Name:	
Address:	
Program of study you have selected:	
Length of time required to complete this program:	
At what level are you currently in this program?	Beginning <input type="checkbox"/>
	Middle <input type="checkbox"/>
	Final year <input type="checkbox"/>

Employment History

Briefly describe your employment history in the space below or attached your C.V.:

Volunteer History

Briefly describe any volunteer work you have pursued:

Family / Domestic situation

Briefly describe if you are taking care of family members (ie. time, responsibilities etc.):

Your Interests

In 150 words or less please describe your life circumstances, your interests in sports, music, arts, your hopes and dreams for the future and why this scholarship is important to you:

Income and Expenses

INCOME		\$
1.	Your income for the previous year (attach a copy of Revenue Canada Tax Assessment / Notice Details you received after you filed. Enter the amount from line 236)	
2.	Income of spouse (Attach a copy of his/her Revenue Canada Tax Assessment / Notice Details)	
3.	Income of both parents or guardians if you are living with them. Use the amount from line 236 on their Revenue Canada Tax Assessment / Notice Details and attach a copy of this form	
TOTAL INCOME		

EXPENSES

1. If you are financially responsible for children, spouse or other dependent people please give details such as number of people, level of responsibility and ages of dependents below.

2. Any extraordinary expenses due to health issues, transportation needs or other reasons. Explain.

By signing below:
I certify that my answers are true and complete to the best of my knowledge;
I agree to allow my image to be used in published materials, presentations and web sites that promote the programs of the Multicultural Association of Fredericton Inc.
I agree to participate in any MCAF promotions for the Newcomer Scholarship Fund including media interviews, presentations, or speeches as requested by MCAF.

Signature: _____ Date: _____