Your Text Here



The Reverend Archie MacLachlan Memorial Award

Student Bursary Application Form

Bursary Program

Each year the Canadian Foundation for Spiritual Care/Fondation canadienne de soins spirituels (CFSC/FCSS) sets aside a bursary fund intended to assist persons currently enrolled in a Canadian Association for Spiritual Care/Association canadienne de soins spirituels (CASC/ACSS) accredited course and experiencing financial difficulty. Students may apply for the bursary once per fiscal year (January 1st to December 31st). Students must submit a completed application form that details their estimated financial expenditures and resources during the academic year. Incomplete or late application forms will not be considered. Please note that bursary funds are limited and vary from year to year.

Program Goals

- To encourage and support current CASC/ACSS Members
- To promote education through CASC/ACSS accredited courses for individuals involved in the process of career development in Spiritual Care and Psychospiritual Therapy
- To work towards the professionalism of Spiritual Care Providers/Psychospiritual Therapists and in turn to promote public awareness of the role and qualifications of Spiritual Care Providers/Psychospiritual Therapists

Program Guidelines

- Applicant must be a CASC/ACSS Member in good standing
- Applicant must be enrolled in a CASC/ACSS accredited course in either CPE or PTE or have completed a unit in the current year
- Consideration is given to those students in financial need
- All sections of the application, including the Supervisor-Educator Letter of Support, must be completed/uploaded.
- Incomplete applications will not be considered by the Bursary Committee of CFSC/FCSS.

Bursary Online Application

Your application will be accepted and reviewed when you complete the following:

- 1. the bursary online application form
- 2. upload your personal statement
- 3. upload your Supervisor-Educator Letter of Support

Please Note: If your bursary is unsuccessful, you may reapply. There are no appeals on bursary decisions. Please note that outcome of their bursary application will be communicated to all students by email.

Applicant's Cont	act Inf	ormation					
Last Name * Home Address 1 *		First Name * Home Address 2					
Home City/Town *	Рго	Province *		stal Code *	CASC/ACSS Region *		
			~			•	~
Email address *		Phone	Number *				
Social Insurance Number	r * ?						
Your application fo	r Bursa	ry assistance mu	ust be acco	mpanied by	y answers to the followin	g:	
						Yes	No
Are you currently a member of CASC/ACSS?					0	0	
If you are not currently a membership application			you attached	to this applica	tion a copy of your submitted	0	0
Are you currently enrolle	ed in a CA	SC/ACSS accredited o	course of CPE	or PTE?		0	0
If not, do you plan to enr this fiscal year? (January			course of CPI	E or PTE? or ha	ve you completed a course in	0	0
Have you included your p why you feel you should					ular activities, and as well as	0	0
Have you included the Su	pervisor-	Educator Letter of Su	upport from y	our Superviso	r-Educator?	0	0
If you have not been offi Educator immediately up			E or PTE, send	l a letter of su	pport from the Supervisor-	0	0
Have you received previo	ous CASC	/ACSS support?				0	\circ
Family Dependar	nt Info	rmation					
Do you have any depend	ants? (Ch	nildren under 18, infi	irm parent or	adult child w	ith disability) *		
○ Yes							
○ No							
If Yes, list dependants.							

List dependants and t Daughter, age 8 yrs o	their relationship to you. Exam r Infirmed Parent	iple:			
3 , 3 ,					
0 characters					
Current Stude	ent Loans, Grants or B	Rurgaries			
Carrette Stade	The Louis, Granes or D	disancs			
	dent loans, received grants o		, including federal,	provincial, local or	private? *
Please indicate any so you are not, please in	ource of assistance you are rec idicate "NONE"	eiving. If			
		/			
Have you applied for	r assistance for this academic	: year? * If	not, please explain	n: *	
○ Yes					
○ No					
Current De	bt				
Accumulated studen	t loans (including this year) *	* Home me	ortgage *		
Accumulated loans f	rom bank, trust/finance com	panies * C	Outstanding balance	on credit cards *	Private loans *
Current Total:					
\$0.00 Calculate					
Current Ass	sets				
Do you own a car? *	Make *	Year *			
○ Yes					
○ No					
Do you own a home?	* If Yes, \$ value *				
○ Yes					
○ No					
Do you have income	from stocks, bonds, or trusts	?* If Yes,	Value \$ *		
○ Yes					
○ No					
Do you expect an inc	come tax refund? * If Yes, Siz	ze of Refun	d *		

○ Yes	
○ No	
How much money do you think you will need to complete	e your academic year? *
What will you do if this bursary does not provide enough	n funds? *
Other scholarships/awards/bursaries applied for? *	If YES, please indicate amount *
Please provide Name and possible value	
	<u>/</u>
	ervisor-Educator Letter of Support and any
supporting documentation.	
Choose Files No file chosen	
Agreement and confirmation	
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I hereby confirm that I am a CASC/ACSS student taking a CF status for the 2022/2023 academic year.	PE or PCE course at an accredited site on a full time or part time
Please accept this document as my application for the Rever documentation attached, and confirm that I comply with the	rend Archie MacLachlan Memorial Bursary. I have read the endingations, intent and restrictions of the bursary. I am therefore
eligible to submit this application.	,
I am attaching the required documentation of the Financial A	Analysis.
It is clearly understood that if plans change and the Unit of 0	CPE or PTE for which this bursary applies is not completed, the entire
bursary shall be returned to CFSC/FCSS.	,
Full Name *	
Signature *	
5.5.1000.0	

<u>clear</u>