

## Emergency Bursary Application for BC Residents

The Province of British Columbia has made available emergency funding for both full-time and part-time domestic students that are BC residents. This is non-repayable funding and eligibility will depend on each applicant's unique situation. Tuition fees for the semester must be paid in full in order to be eligible for the funding. Maximum funding is \$750 and is limited to once per academic year. *Please note that international and out of province students will not qualify for funding from this resource.*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student Number: \_\_\_\_\_ Program and Year: \_\_\_\_\_

Emily Carr Email Address: \_\_\_\_\_ SIN: \_\_\_\_\_

Where are you currently living?

- |   |  |
|---|--|
| <input type="checkbox"/> with parents         | <input type="checkbox"/> rented accommodations |
| <input type="checkbox"/> self-owned residence | <input type="checkbox"/> renting from parents  |

1. In what province did you reside for the last 12 consecutive months **without** being a full-time student? \_\_\_\_\_
2. Did you apply for government student assistance (i.e. StudentAid BC) for the current semester and the last semester?

Last Semester    ☐ Yes   ☐ No

Current Semester    ☐ Yes   ☐ No

Amount Received \_\_\_\_\_ Amount Received \_\_\_\_\_

If you did not apply for student aid funding please explain why:

\_\_\_\_\_

3. Students must be registered and attending in order to qualify. How many credits are you currently registered in? \_\_\_\_\_

4. Please explain the nature of your financial emergency:

---

---

---

5. What are you seeking emergency assistance for? Please be specific (i.e. groceries, rent, supplies, medical costs).

---

6. Are you married/common law/partnered?

☐ Yes      ☐ No    If no, proceed to question 8.

**Spouse's Information:**

<input type="checkbox"/> Employed	Net Salary per month: \$ _____
<input type="checkbox"/> Student	Current Semester Tuition: \$ _____ Books & Supplies: \$ _____
	Received student loan: <input type="checkbox"/> Yes <input type="checkbox"/> No    Amount: \$ _____
<input type="checkbox"/> Unemployed	Source and amount of income: _____
<input type="checkbox"/> Other	Explain: _____

7. If you are a parent, please list the first name & age for each of your dependent children:

<u>First Name</u>	<u>Age</u>	<u>In your custody?</u>	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

8. Are you currently registered with Emily Carr for direct deposit? ☐ Yes    ☐ No

**IMPORTANT: You must be registered for direct deposit to receive this funding.** If you are not already registered, please complete the application available on our website at:

<https://www.ecuad.ca/about/administration/financial-services/direct-deposit>

## 9. Budget

What are your average **monthly** expenses while you are attending the University?

- **Do not include tuition and supplies.**
- **Married students, and students with dependents, must provide expenses for the entire family.**

### MONTHLY EXPENSES

**Rent** (your share) \$ \_\_\_\_\_

**Food** \$ \_\_\_\_\_

**Transportation** (not U-Pass) \$ \_\_\_\_\_

**Miscellaneous** \$ \_\_\_\_\_

**Medical / Dental** \$ \_\_\_\_\_

**Utilities** (phone, hydro, etc.) \$ \_\_\_\_\_

**Other** (specify below)

\_\_\_\_\_ \$ \_\_\_\_\_

### MONTHLY RESOURCES

**Part-time work** \$ \_\_\_\_\_

**Scholarship** \$ \_\_\_\_\_

**Bursary** \$ \_\_\_\_\_

**Parent contribution** \$ \_\_\_\_\_

**Spouse's income** \$ \_\_\_\_\_

**Other** (specify below)

\_\_\_\_\_ \$ \_\_\_\_\_

**Please return your completed form to [finawards@ecuad.ca](mailto:finawards@ecuad.ca) from your Emily Carr email address only. Applications submitted from another email address will not be considered. You will be notified of your eligibility within 7 businessdays**