

PLEASE NOTE: IF SEPTEMBER 2020 DOES NOT SEE A RETURN TO COLLEGE AND UNIVERSITY CLASSES DUE TO COVID-19, APPLICATIONS FOR THE CURREN AND WANDERER'S SCHOLARSHIP WILL NOT BE REVIEWED OR SCHOLARSHIPS OFFERED. APPLICATION REVIEW WILL BE RESCHEDULED FOR LATE FALL 2020 UNLESS OTHERWISE DETERMINED.



Wanderer's Trust Scholarship Fund
Canadian Paraplegic Association (Nova Scotia)

(Submission date for completed application, along with supporting documents, is September 30th annually.)

Wanderer's Trust Scholarship Fund
c/o Canadian Paraplegic Association (Nova Scotia)
Suite 255 – Mumford Professional Centre
6960 Mumford Road
Halifax, Nova Scotia
B3L 4P1 email: halifax@canparaplegic.org

Please Note: Falsification of information will result in automatic rejection of application.

(Please Print)

Name: _____

Address: _____

_____ **Postal Code:** _____

Telephone: _____ **Email:** _____

Date and Place of Birth: _____

M/D/Y

City/Town

Province

Canadian Citizenship By: **Birth**_____ **Naturalization**_____ **Landed Immigrant**_____

Note: If by Naturalization, a photocopy of your certificate must be attached to your application.

Marital Status: _____ **Social Insurance Number:** _____

Disability (Classification/Type and Extent): _____

We wish to formulate a clear picture of how (in)accessibility may influence your educational experience. Please feel free to add any comments you may have.

Do you have access to accessible student housing? _____

Do you require aides for communication, and if so are the aides in place and suitable for your education environment?

Are there mobility equipment items (wheelchair, crutches, cane etc.) you require that you currently do not have?

Do you require an attendant or person providing assistance (i.e. note taker) be with you in class?

Do you require an attendant or person providing assistance be with you between classes?

Are you aware of any barriers at the educational institution that may in some way impede access to class?

Do you partake in class via on-line, or by physically being present?

Do you have access to dependable, fully accessible transportation? Please comment if access to transportation will be affected during the winter season.

Do you have special diet requirements that can be provided by the educational institution?

Do you have access to essential education related software, programs and/or other technologies?

Are disability related resources and supports located within the educational institution?

Name and Address of Medical Doctor you have requested confirmation of details of your disability:

Are you or have you been the recipient of another award, scholarship or bursary? Yes_____ No_____

If yes, please list and include amount (\$) received: _____

List chronologically the secondary schools, colleges, technical institutes, or universities you have attended:

<u>Name</u>	<u>Address</u>	<u>Start Date</u>	<u>Date Completed</u>
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As noted in the Supplement, an OFFICAL TRANSCRIPT must be sent for the most recent year of study

Name of Post Secondary Institution you plan to attend: *(a letter of acceptance must be attached)*

Starting Date: _____ **Diploma, Certificate or Degree:** _____

Describe course of study and identify level: _____

Year 1 _____ **Year 2** _____ **Year 3** _____ **Year 4** _____ **Year 5** _____ **Other** _____

Please explain Other: _____

Write a paragraph on your plans and goals for your future career or profession: *(If you require more space, please attach a sheet to this application form)*

Hobbies and Interests: _____

Employment History: *(please list)*

Employer

Address

Date

Position

What is your current involvement in sports and do you plan on specializing in a sport related career or profession?

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****** **Please include two references.** These do not necessarily have to be from an employer, past or present.

****** As noted on page four, **written confirmation of disability from a doctor or specialist is required.**

****** As noted on page five, **an Official Transcript must be sent for the most recent year of study.**

****** Also noted on page five, **a letter of acceptance from the post secondary institution you plan to attend must be attached.**

****PLEASE REVIEW APPLICATION TO ENSURE ALL FIELDS ARE COMPLETED, AND REQUIRED ATTACHMENTS ARE INCLUDED. MISSING INFORMATION WILL RESULT IN DELAYED PROCESSING OF YOUR APPLICATION.**

