

CENTRE FOR HOSPITALITY AND CULINARY ARTS AWARDS & SCHOLARSHIPS:

LCBO Spirit of Inclusion Initiative Award

Completed application forms must be sent via email to seleftheriadis@georgebrown.ca.

To get more information on specific awards visit, George Brown Awards and Scholarships webpage.

Note: please make sure that you have entered your Social Insurance Number (SIN), or International Tax Number (ITN) (whichever is applicable) in Stu-View, as required for tax reporting purposes

*Not eligible for Second Career recipients

Please answer the questions below to the best of your ability

)a	te of Birth:	Student Number:		
m	ail Address:			
ta	tus in Canada: Canadian Citizen	Permanent Resident/ International Protected Person		
Jυ	estions			
1.	What Program and semester are you curre	ntly enrolled in?		
2.	Please describe how you identify as a worr	Please describe how you identify as a woman (examples include, but are not limited to, the following)		
	Woman of Colour Indigen	nous Woman 2SLGBTQ+ Other		
	Please include any additional informat	tion that you would like to share:		
3.		ed to tell the donor about you? Include your program, year of study, ture goals, and how receiving an award would impact you.*		
3.	List any extracurricular, volunteer, leade involved in within the last 3 years. Pleas the specific activities, your role and the			

^{*}Please limit to 2,000 characters including spaces.

	 Please indicate your budget below; this budget should reflect the resources and costs associated with studying at George Brown College from September to April (8 months). Please ensure that all sections are completed. STUDENT BUDGET 				
Fir	nancial Resources	Amount (\$)			
Ре	rsonal Savings; prior to study period.				
Pa	rental or Spousal Contribution; includes all contributions to any of your expenses.				

Scholarships and Bursaries; includes any Continuing Education bursary funds.	
Loans; i.e. Bank line of credit, other family members, etc.	
Government Assistance; e.g. Social Services, EI, ODSP, OW, OSAP, DIAND	
Employment Income; during the academic year	
Other Resources; specify:	
Total Resources:	
Estimated Expenses	Amount (\$)
Tuition and Academic Fees	
Books and Related Supplies	
Monthly Housing Costs; i.e. rent, mortgage, home insurance, maintenance fees.	
Monthly Utilities; i.e. water, electricity, gas, phone, cable, internet.	

I declare that the information on this form is complete and true to the best of my knowledge. I understand this
information will be used to assess eligibility for any George Brown awards that I apply for and may be shared
with the donor(s), authorized reviewing committee members, including faculty members and other George Brown
employees when necessary and relevant to the selection.

Signature	Date	
Signature	Dule	

Monthly Transportation; i.e. public transit, automobile payments, automobile insurance, gas.

Monthly Personal/Miscellaneous; i.e. clothing, personal care, medication, uncovered medical

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

Monthly Food; i.e. groceries, dining.

Other Expenses; specify:

expenses, childcare.

Total Expenses:

George Brown College requires award recipients to provide their SIN or ITN (International Tax Number) for T4A reporting purposes as mandated by the Ontario government. The personal information on this form is collected under the legal authority of Ontario Colleges of Applied Arts and Technology Act, 2002. The information is used for the administrative and statistical purposes of the College including but not limited to, Admissions, Registration and maintaining records, as well as Awards and Scholarships, Alumni and College Foundation administrative functions and/or the Ministries of Agencies of the Government of Ontario and the Government of Canada. This information is being collected under section 39 (2) and section 42 of the Freedom of Information and Privacy Act of Ontario.