



## Rix Family Foundation Science and Technology Award

### Award Application Form

**Award Amount: 2 awards at \$1000 each**

**Application Deadline: June 1, 2011**  
(Applications must be post marked by June 1, 2011)

**Complete and return application  
by mail to:**  
Minerva Foundation for BC Women  
Attn: Tania Shepelska, Education  
Awards Coordinator  
320 - 111 West Hastings Street  
Vancouver BC V6B 1H4

**Ph: 604-683-7635**  
**Fax: 604-683-7695**  
**[tania@theminervafoundation.com](mailto:tania@theminervafoundation.com)**  
**[www.theminervafoundation.com](http://www.theminervafoundation.com)**

This award for BC women seeking to advance their education in Science and Technology at a recognized post-secondary education institution in British Columbia is a result of the generosity of the **Rix Family Foundation** in conjunction with the **Minerva Foundation**.

**Eligibility:** The award will be granted on the basis of financial need and academic proficiency. Undergraduate students must be registered in a minimum of nine semester hours of normal graded courses. Graduate students must be registered in an approved full-time program. Candidates must maintain a minimum CGPA of 2.00

**To help us evaluate your application, please include the following documents:**

- This application form, completed and signed
- Two letters of reference preferably from academic professionals or employers
- A personal essay of no more than 1000 words
- A resume listing your career goals, artistic, academic and athletic achievements, volunteer and work experience
- Recent Transcript

**Please note that incomplete applications will not be considered.**

PERSONAL INFORMATION			
Student ID Number:		Social Insurance Number:	
Name:			
Phone:		Email:	
Current Address:			
City:	Province:	Postal Code:	
Will this be: Your parent's home? <input type="checkbox"/> University residence? <input type="checkbox"/> Rented? <input type="checkbox"/> Self-owned <input type="checkbox"/>			
BC Residency: Have you: lived in BC for the past 12 continuous months <input type="checkbox"/> arrived in BC as a permanent resident or landed immigrant <input type="checkbox"/>			
Date of Birth: (YYYYMMDD)		Place of birth:	
What is your Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married/Common-Law <input type="checkbox"/> Widowed <input type="checkbox"/> Separated/Divorced		If Married or Common-Law, please provide: Spouse's name: Spouse's Occupation: Spouse's Social Insurance Number:	
<i>Number of dependants in your custody</i>			
Number of children: 6 & under                      Ages 7 – 11                      Ages 12 –18                      Ages 19 –22 in Full-time studies			
<input type="checkbox"/> Aboriginal <input type="checkbox"/> Recent Immigrant (Year of immigration _____) <input type="checkbox"/> Disability			
Have you previously received any Minerva award?                      Yes <input type="checkbox"/> No <input type="checkbox"/>			

EDUCATION AND CAREER INFORMATION	
<input type="checkbox"/> Graduate <input type="checkbox"/> Undergraduate	
Last high school attended:	City, Province
If BC, School district number:	Date of Graduation: (MM/YY)

### Post-Secondary Institutions Attended

Institution Name	City, Province	Academic Year	Degree/Diploma/Certificate earned	Faculty	Program/GPA

**IMPORTANT: If you wish to be considered for bursary assistance for the upcoming study period, remember to register as a full-time student (at least 80% of a full course load) for the entire applicable period.**

<b>FINANCIAL NEED</b>	
Have you applied or will you be applying for a student loan or grant for the academic period indicated below?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes indicate which provincial and/or federal government and/or chartered bank	

<b>Budget Estimates for the Upcoming September to April</b>			
Use space below for clarifications			
<b>Study Period Expenses</b>		<b>Study Period Resources</b>	
Tuition		Savings	
Books		Awards, Scholarships, Bursaries	
Supplies		Federal/Provincial Student Loans (projected)	
Other Expenses		Student line of credit from a chartered bank	
Education Expenses (A)	\$	Education Resources (C)	\$
<b>Monthly Expenses – include spouses</b>		<b>Monthly Income</b>	
Housing (rent or mortgage)		Part-time Earnings	
Food		Work-study Earnings	
Utilities		Social Assistance	
Household (laundry, cleaning)		Workers' Compensation	
Transportation		Sponsorship	
Entertainment		Orphan's Benefits/ CPP	
Medical/Dental/Optical		Parents Contribution	
Child Care		Spouse's Net Income	
Miscellaneous		Child Care/Tax Benefit	
Other (specify)		Co-op earnings	
Previous Student Loans		Other (specify)	
= Total Monthly Living Expenses		= Total Monthly Income	
X number of months of study		X number of months of study	
= Total living expenses (B)	\$	= Total income (D)	\$
<b>Total Study Period Expenses (A) + (B) =</b>	<b>\$</b>	<b>Total Study Period Resources (C) + (D) =</b>	<b>\$</b>
<b>Total Study Period Expenses minus Total Study Period Resources = Financial Need</b>			
	-	=	\$

**Assets:** Please list owned assets and their value:

- Home owner \_\_\_\_\_
- Recreational property \_\_\_\_\_
- Vehicle make \_\_\_\_\_ year \_\_\_\_\_ book value \_\_\_\_\_
- Term deposits \_\_\_\_\_
- GIC's \_\_\_\_\_
- Mutual funds \_\_\_\_\_
- Stocks \_\_\_\_\_
- Bonds \_\_\_\_\_
- RRSP's \_\_\_\_\_
- RESP's \_\_\_\_\_

**Debts:** Please list debts and amount owing:

- Previous Govt. Student Loans \_\_\_\_\_
- Loans from UBC and past educational institutions \_\_\_\_\_
- Personal Loans \_\_\_\_\_
- Mortgages \_\_\_\_\_
- Other \_\_\_\_\_

**DECLARATION TO BE COMPLETED BY ALL APPLICANTS**

I hereby declare that all information given above is complete and true to the best of my knowledge. I consent to the disclosure of information on this form to other educational institutions and the Student Services Branch of the Ministry of Advanced Education, Training and Technology when necessary to verify information. I understand failure to provide my consent or misrepresentation may result in cancellation of this application or the award I may receive. If granted an award, I understand that debts outstanding to the University of British Columbia will be deducted from the award.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**FREEDOM OF INFORMATION/PROTECTION OF PRIVACY:** The Minerva Foundation complies with the Freedom of Information/Protection of Privacy legislation of the Province of British Columbia. Information collected on application forms is used in the normal course of operations in accordance with this legislation.

Signature \_\_\_\_\_

Date \_\_\_\_\_