

Jillian Kay Joyal Memorial Award

CRITERIA & CHECKLIST

www.ucn.ca/awards

The Jillian Kay Joyal Memorial Award is open to all students who are enrolled full-time in the Bachelor of Nursing program at University College of the North The Pas Campus. Selection is based on academic performance (GPA of 3.59 or higher) and demonstrated financial need. Applicants are required to submit a completed Jillian Kay Joyal Memorial Award application and provide a current copy of their university/college unofficial transcript(s) -if grades are unavailable have instructors sign their name by the WIP to confirm regular attendance. Students funded by student loan must submit loan documentation detailing the loan amount, disbursement dates, etc. This award was established in memory of Jillian Kay Joyal, a graduate of the Bachelor of Nursing program (Class of 2010) and is made possible by her older sister, Jacqueline Joyal. Deadline for application is **February 1, 2023 at 4:30 pm (CST)**; awards: 1; award amount: \$500.

Specific Instruction

Completed Jillian Kay Joyal Memorial Award application and required documentation must be received by 4:30 pm (CST) on February 1, 2023. The completed application package can be mailed/delivered to: University College of the North, Attention: Michelle Ballantyne, Financial Awards Officer, Box 3000, The Pas, Manitoba, R9A 1M7, or faxed to: (204) 627-8514.

For more information, please contact Michelle Ballantyne, Financial Awards Officer for University College of the North at (204) 627-8517 or e-mail mballantyne@ucn.ca.

CHECKLIST:

- open to all students who are enrolled full-time in the Bachelor of Nursing program at University College of the North The Pas Campus
- selection is based on academic performance (GPA of 3.59 or higher)
- selection is based on demonstrated financial need
- applicants are required to submit a completed Jillian Kay Joyal Memorial Award application
- applicants are required to provide a current copy of their university/college unofficial transcript(s) -if grades are unavailable have instructors sign their name by the WIP to confirm regular attendance
- students funded by student loan must submit loan documentation detailing the loan amount, disbursement dates, etc.

Note: Decisions made by the UCN Awards Committee are final and not subject to appeal. It is the student's responsibility to ensure all forms are filled out completely and the application package includes all supporting documents.



University College
of the North

The Pas Campus & Regional Education and Training Centre Students
Michelle Ballantyne, Financial Awards Officer
Box 3000, The Pas, Manitoba, R9A 1M7
Phone: (204) 627-8517 Fax: (204) 627-8514
Toll-free: 1-866-627-8500 Extension: 8517

Thompson Campus Students
Emerald McKay, Learners' Assistance Centre Coordinator
55 UCN Drive, Thompson, Manitoba, R8N 1L7
Phone: (204) 677-6402 Fax: (204) 677-6416
Toll-free: 1-866-677-6450 Extension: 6402

Award, Bursary & Scholarship Application

-PRINT ALL INFORMATION IN BLACK INK ONLY-

APPLICATION AVAILABLE IN ANOTHER FORMAT UPON REQUEST.

| | |
|--|--------------------|
| Name of award applying for: Jillian Kay Joyal Memorial Award | Date: (yyyy/mm/dd) |
|--|--------------------|

PERSONAL INFORMATION

| | |
|---|---|
| Student number: | Social insurance number: |
| First name: | Last name: |
| Date of birth: (yyyy/mm/dd) | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-law <input type="checkbox"/> Separated, divorced, widowed | |
| Permanent mailing address: | |
| City: | Province: <input type="text"/> |
| Postal code: <input type="text"/> | |
| Phone: (H) () () (C) () () (W) () () | E-mail: <input type="text"/> |

EDUCATIONAL BACKGROUND

| | | |
|--|-------------------------------|---|
| University/college program of study: | Term: <input type="text"/> | Enrolled in: <input type="checkbox"/> Full-time studies <input type="checkbox"/> Part-time studies |
| Term GPA: (please attach current copy of unofficial transcript(s); if grades are unavailable have your instructors sign their name by the WIP to confirm regular attendance) | Course-load for term: _____ % | Program length: (e.g. year 2 of 4 year program) year _____ of _____ |

FAMILY INFORMATION

| | |
|---|--|
| Number of dependents under the age of 18 residing with you: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> Not applicable | |
| List ages of dependents: _____ | Is spouse, common-law: <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/> Not applicable |

FUNDING SOURCES

| | |
|---|---------------------|
| How will you be financing your education? (please check those that apply) | |
| <input type="checkbox"/> Canada/Manitoba Student Loan/Grants/Bursaries/Scholarships/Awards (please attach proof of loan amount and loan details, e.g. disbursement dates, etc.) | |
| <input type="checkbox"/> Manitoba Employment & Training Services <input type="checkbox"/> Parent/s, Relative, Donor | |
| <input type="checkbox"/> Band, Tribal Council, Manitoba Metis Federation (name) _____ <input type="checkbox"/> Other _____ | |
| Financing will be: <input type="checkbox"/> Full (books, tuition/fees and living allowance) <input type="checkbox"/> Partial (please circle those that apply: books, tuition/fees, living allowance) | |
| List funding source name(s) and percent or amount of financing for term: | |
| Source Name(s) | Percent or Amount |
| _____ | _____ % or \$ _____ |
| _____ | _____ % or \$ _____ |
| _____ | _____ % or \$ _____ |

FINANCIAL INFORMATION

Please note: If your sponsor pays for tuition, books or supplies, do not include these costs below as either income or expenses. If you are receiving partial sponsorship, indicate only the amount you pay. Also, when applicable only include non-subsidized amounts for expenses (i.e. only include child care portions or rent amounts that you pay from monthly resources).

| Monthly Expenses | \$ | | Monthly Resources | \$ |
|--|-----------------|--|---|-----------------|
| Mortgage/Rent <small>circle one</small> | _____ | | Net Earnings <small>employment, EI, pension, disability, etc.</small> | _____ |
| Food <small>include cleaning products</small> | _____ | | Savings <small>spring, summer employment (total amount divided by total months in program)</small> | _____ |
| Utilities <small>hydro, water, electricity, etc.</small> | _____ | | Spouse, Common-law's Net Income | _____ |
| Transportation <small>gas, taxi, vehicle payments, insurance, etc.</small> | _____ | | Sponsorship Training Allowance <small>all agencies</small> | _____ |
| Child Care | _____ | | Social Assistance <small>include rent and expenses paid on your behalf</small> | _____ |
| Dental, Medical | _____ | | Child Benefits <small>child tax, universal child care, etc.</small> | _____ |
| Laundry <small>coin laundry, soap, softener, etc.</small> | _____ | | Awards, Bursaries, Scholarships, Grants <small>(total amount divided by total months in program)</small> | _____ |
| Telephone, Cell, Internet, Cable <small>basic only</small> | _____ | | Support Payments <small>spousal, child, settlements, divorce, MPI, etc.</small> | _____ |
| Miscellaneous <small>clothing, grooming, etc.</small> | _____ | | Cash Gifts <small>parents, donors, inheritances, RESP's, etc. (total accessible amount for academic year divided by total months in program)</small> | _____ |
| Entertainment <small>children's activities, etc.</small> | _____ | | Benefit Payments <small>orphans, WCB, CRISP, disability, survivor, etc.</small> | _____ |
| Loan Payments <small>student, bank; list only if making payments</small> | _____ | | GST <small>Jan, Apr, July, Oct (total received in term divided by total months in term)</small> | _____ |
| Support Payments <small>spousal, child, settlements, divorce, MPI, etc.</small> | _____ | | Other <small>indicate source</small> | _____ |
| Credit Cards <small>minimum payments only</small> | _____ | | Other Resources | |
| Other <small>indicate source</small> | _____ | | Canada/Manitoba Student Loan <small>(total amount divided by total months in program)</small> | _____ |
| Other Expenses | | | Canada/Manitoba Student Loan Grants/ Bursaries/Scholarships/Awards <small>(total amount divided by total months in program)</small> | _____ |
| Tuition/Compulsory Fees <small>(total for term divided by total months in term)</small> | _____ | | Other <small>indicate source</small> | _____ |
| Books <small>include GST (total for term divided by total months in term)</small> | _____ | | Total Monthly Resources | \$ _____ |
| Supplies <small>(total for term divided by total months in term)</small> | _____ | | | |
| Total Monthly Expenses | \$ _____ | | | |

Financial Need

Calculate your total financial need for the term by subtracting your total monthly expenses from your total monthly resources and multiplying the number of months in the term by your total monthly financial need.

_____ (- minus) _____ (= equals) _____ (x multiply) _____ (= equals) _____
Total monthly resources Total monthly expenses Total monthly financial need Months in term TOTAL FINANCIAL NEED FOR TERM

If there is any additional information that you would like the Awards Committee to be aware of, please submit a letter with your application.

I, _____ certify that the information given on this application form is complete and true in every respect; any false and/or omission of information will be sufficient cause for disqualifying my application from consideration. I understand that as an award applicant/recipient, the information on this application may be provided to the Awards Committee/Donor. I also agree that I may be referred to the Counsellor or Financial Awards Officer should my need be higher than \$2,000 and I may be requested to provide further information.

Please note: Any outstanding debt owed to University College of the North may be deducted from monetary awards. Successful applicants may also be asked to provide receipts to verify monthly income and expenses.

Decisions made by the UCN Awards Committee are final and not subject to appeal. It is the student's responsibility to ensure all forms are filled out completely and the application package includes all supporting documents.

Signature of applicant: _____ Date: _____

This personal information is being collected solely for use by the UCN Awards Committee comprised of instructors, staff, an elder and student at UCN. This information is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection contact the FIPPA Coordinator, Box 3000, University College of the North, The Pas, Manitoba, R9A 1M7, Phone 204-627-8500. Rev. 2/23/22