

# BOLT CHARITABLE FOUNDATION

## Award Application Checklist



In addition to the Scholarship/Bursary Application Form, you must submit the following to ensure that you will be considered for the intended BOLT Scholarship. Include this COMPLETED checklist on the FRONT of your application package.

### EDUCATION INFORMATION

Include the following education information:

- Transcripts (official or unofficial)
- Confirmed acceptance letter for program/training

### FINANCIAL INFORMATION

You **MUST** include the following financial information:

- Summary Table of Expenses and Income for School Year (page 7 of the application)
- OSAP Funding Summary (screenshot of grants and loans from OSAP website)
- Most-recent CRA Notice of Assessment or tax return

Include **ONE** of the following (if applicable):

- T4 slip of most-recent employment
- Letter from your employer confirming wages
- Photocopy of cheque stub or social assistance stub

### Written explanation for financial situation

- Written explanation for ineligibility for OSAP (completed on page 9 of application **if applicable**)
- If your income (or the combined income of you and your spouse/common law partner if applicable) is **ZERO**, you must provide a letter indicating how your daily living costs (e.g. accommodation, food) are being met.

### ADDITIONAL REQUIRED INFORMATION

- Summary Questions (completed on pages 8 and 9 of application)
- Two letters of reference regarding your academic or work achievements or community/volunteer commitments
- Signed Consent and Disclaimer page

# BOLT CHARITABLE FOUNDATION

## Award Application



### AWARD PURPOSE

The BOLT Charitable Foundation Award is designed to recognize youth and provide financial assistance to those who aspire to obtain **a post-secondary education or skilled training in a construction-related field and who have demonstrated a sincere interest in pursuing a career in the construction industry**

### ELIGIBILITY CRITERIA

- Have applied to the college/university/training facility by the prescribed deadline and must provide proof of acceptance into the program.
- Must demonstrate financial need
- Open to students/youth who are Canadian Citizens or Permanent Resident between the ages of 17-29 living in the Greater Toronto Area
- Be a full-time student in one of the designated programs or provide sufficient explanation warranting enrollment in another construction-related program
- Students applying for subsequent years of support, must provide an Enrollment Verification letter, and must provide transcripts
- Demonstrate an interest in a career in construction

### GENERAL INFORMATION

- Available to students entering their first year or subsequent year of studies at an accredited post-secondary institution or training facility in a program related to construction (visit [www.boltonline.org](http://www.boltonline.org) for a list of eligible courses)
- Applicants seeking renewal funding must submit a new application for every year of study
- Courses and short-term skilled training not appearing on the list will be evaluated on an individual basis; however, applicants must meet the eligibility criteria
- Applicants must have applied to the college/university/training facility by the prescribed deadline and must provide proof of acceptance into the program or training
- The BOLT Selection Committee will determine the distribution of funds throughout the academic year

Completed and signed application and essay may be scanned and emailed to [bolt@tridel.com](mailto:bolt@tridel.com) or be mailed to:

BOLT Selection Committee,  
BOLT Charitable Foundation  
4800 Dufferin Street, Suite 200  
Toronto, Ontario M3H 5S9

**Applications for awards for the 2020/2021 school year must be received by Friday, April 30, 2020**

# BOLT CHARITABLE FOUNDATION

## Award Application



### APPLICANT INFORMATION

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

Date of birth (mm/dd/yyyy): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

SIN #: \_\_\_\_\_ Are you a Canadian Citizen or a Permanent Resident of Canada?  Yes  No

### How did you hear about the BOLT Award?

School  Online  Friend  Family Member  Pathways to Education  
 Agency (please specify – e.g. Children's Aid): \_\_\_\_\_  Other: \_\_\_\_\_

This is my first time applying for a BOLT Award  
 I have received a BOLT Award(s) in the past (specify year(s) of successful application(s): \_\_\_\_\_

### CURRENT STATUS INFORMATION

#### To which gender identity do you most identify with?

Female  
 Male  
 Undeclared

#### Optional

**Do you self-identify as Indigenous? In the context of this question, an Indigenous person in Canada is a person who identifies as First Nation (status/non-status), Métis, or Inuk (Inuit)**

Yes  
 No  
 Prefer not to specify

# BOLT CHARITABLE FOUNDATION

## Award Application



### PAST EDUCATION

High School Name : \_\_\_\_\_ Address: \_\_\_\_\_

From (year): \_\_\_\_\_ To (year): \_\_\_\_\_ Did you graduate?  Yes  No

If No, highest grade completed: \_\_\_\_\_

Name of College/University/Institute/Training Facility: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Address: \_\_\_\_\_

From (year): \_\_\_\_\_ To (year): \_\_\_\_\_ Did you graduate?  Yes  No

Level of study:  Diploma  Certificate  Bachelor's Degree  Master's Degree

Other (specify): \_\_\_\_\_

Name of Other Educational Facility: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Address: \_\_\_\_\_

From (year): \_\_\_\_\_ To (year): \_\_\_\_\_ Did you graduate?  Yes  No

Level of study:  Diploma  Certificate  Bachelor's Degree  Master's Degree

Other (specify): \_\_\_\_\_

### CURRENT SCHOOL AND PROGRAM INFORMATION FOR THE 2020-2021 YEAR

**Provide the name of the institution you are planning to attend**

College/University/Institute/Training Facility: \_\_\_\_\_

Name of Program: \_\_\_\_\_ Address: \_\_\_\_\_

### WHAT ARE THE START AND END DATES IN YOUR 2020-2021 STUDY PERIOD?

Start date (mm/dd/yyyy): \_\_\_\_\_ End (mm/dd/yyyy): \_\_\_\_\_

### WHAT IS YOUR CURRENT LEVEL OF STUDY (CHECK ONE)

Diploma  Certificate  Bachelor's Degree  Master's Degree  Other (specify): \_\_\_\_\_

# BOLT CHARITABLE FOUNDATION

## Award Application



### WHICH YEAR OF YOUR PROGRAM WILL YOU BE ENTERING IN 2020-2021?

- Year 1       Year 2       Year 3       Year 4       Year 5

### TOTAL LENGTH OF PROGRAM (START TO COMPLETION)

- 1 Year       2 Years       3 Years       4 Years       5 Years

### EMPLOYMENT

- I am currently employed part-time       I am currently employed full-time       I am currently unemployed

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Company Address: \_\_\_\_\_

### Summer employment (from the beginning of May 2019 to the end of August 2019)

- I was employed during the summer of 2019

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

- I was unemployed during the summer of 2019 (please explain below why you did not have summer employment)

### FINANCIAL INFORMATION

Enter your total gross income from January 1, 2019 to December 31, 2019 as indicated on Line 150 of your 2019 Canadian Income Tax return. If you have not filed a 2019 Canadian income tax return, provide the amount you expect to report.

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

### Do you have any dependents? This can include a spouse, common-law partner or dependent child.

- I am single (no dependents)
- I am single (**with dependents – specify # of dependents \_\_\_\_\_**)
- I am married/common Law (no dependents)
- I am married/common law (**with dependents – specify # of dependents \_\_\_\_\_**)

# BOLT CHARITABLE FOUNDATION

## Award Application



Indicate the type and amount of government income you expect to receive during your 2020 – 2021 Study Period.

- N/A
- Employment Insurance: \_\_\_\_\_
- WSIB: \_\_\_\_\_
- Ontario Disability Support Program: \_\_\_\_\_
- Ontario Works: \_\_\_\_\_
- Post-Secondary Student Support Program (for indigenous students only): \_\_\_\_\_
- Second Career: \_\_\_\_\_
- Other: \_\_\_\_\_

### OSAP

- OSAP Benefits: Grants \$ \_\_\_\_\_ Loans \$ \_\_\_\_\_
- Did not qualify for OSAP (please specify why you did not qualify for OSAP on page 9 of application)

### WILL YOU BE PAYING RENT FOR THE FOLLOWING MONTHS? (CHECK ANY THAT APPLY)

- January 2020    February 2020    March 2020    April 2020    May 2020    June 2020
- July 2020    August 2020    September 2020    October 2020    November 2020    December 2020

### DEMONSTRATED INTEREST IN CONSTRUCTION INDUSTRY OR CONSTRUCTION-RELATED FIELD

Have you participated in any of the following (Check any that apply)?

- BOLT Day of Discovery or BOLT two-week Job Shadowing Program
- Completed a high school program related to construction/trades (please specify: \_\_\_\_\_)
- Worked in the construction industry for a minimum of three months
- Other (please specify: \_\_\_\_\_)

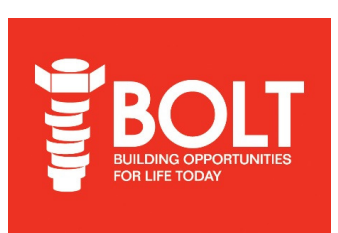
### SUMMARY QUESTIONS

The following questions must be answered on the Written Responses Page (page 8 & 9), to be submitted with your application

1. Outline your educational/training and career goals.
2. Describe your extracurricular activities in any and/or all the following areas, and indicate the time committed per month:
  - Employment – part time jobs, etc.
  - Community – leadership, special projects, etc.
  - Home – family & household responsibilities
  - Interests and Hobbies – Sports, clubs, special projects, etc.
3. How do you plan to fund your post-secondary education/training?
4. Please answer **one** of the following:
  - Why should you be the one who receives this award?
  - Where do you see the future of the construction industry?
  - What do you think will make you successful in a career in the construction industry?

# BOLT CHARITABLE FOUNDATION

## Summary Table of Expenses and Income



### SUMMARY TABLE OF EXPENSES AND INCOME

Please complete the following table to indicate your estimated income and expenses for the upcoming school year. This is an essential component to a full and complete application.

### WHAT ARE THE START AND END DATES IN THE 2020-2021 STUDY PERIOD?

Start date (mm/dd/yyyy): \_\_\_\_\_ End (mm/dd/yyyy): \_\_\_\_\_

School Year Income		School Year Expenses	
Employment Income (e.g. part-time/full-time earnings)	\$	Tuition, fees, UHIP	\$
Savings	\$	Books	\$
Spouse/partner/family's contribution	\$	Program-related safety equipment (e.g. safety glasses, hard hat, safety boots)	\$
Government sponsorship (e.g. WSIB, EI, Ontario Works)	\$	Technology expenses (e.g. computer cost, phone hardware)	\$
OSAP/loan	\$	Rent	\$
OSAP/grants	\$	Utilities	\$
Other Scholarships/Awards	\$	Phone/Internet	\$
Other (specify)	\$	Food (e.g. groceries, fast food)	\$
		Transportation costs (e.g. public transit, car payment, gas, maintenance)	\$
		Personal Expenses (e.g. clothing, personal care, laundry, clothing)	\$
		Uninsured medical/dental (receipts required)	\$
		Childcare (if applicable)	\$
		Other (please specify)	\$



### SUMMARY QUESTIONS

*The following questions must be answered and submitted with your application.*

1. Outline your educational/training and career goals.

2. Describe your extracurricular activities in any and/ or all the following areas, and indicate the time committed per month:

**Employment – part time jobs, etc.**

**Community – leadership, special projects, etc.**

**Home – family & household responsibilities**



### Interests and Hobbies – Sports, clubs, special projects, etc.

3. How do you plan to fund your post-secondary education/training?

4. Please answer **one** of the following and write your response in the space provided.

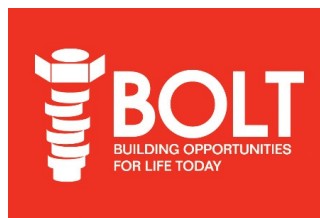
- Why should you be the one who receives this award?
- Where do you see the future of the construction industry?
- What do you think will make you successful in a career in the construction industry?

### FINANCIAL EXPLANATION

Please provide an explanation as to why you have been declared ineligible for OSAP funding (**complete only if applicable**)

# BOLT CHARITABLE FOUNDATION

## Consent and Disclaimer



### CONSENT STATEMENT

The Applicant hereby authorizes and consents to the following:

(a) the release of all of the information contained herein to the appropriate Selections Committee and/or Board of Directors;

(b) the release of the Applicant's contact information to Award donors (including name, telephone number, e-mail, and mailing address), so that they may contact the Applicant personally;

(c) that in the event that the Applicant is awarded the Award, the BOLT Charitable Foundation may publish the Applicant's name, photo, and fact that they were awarded the Award in any and all forms of media; and

(d) That the Selections Committee may make any reasonable and necessary inquiries of third parties to verify the information provided herein.

### PRIVACY STATEMENT

BOLT Charitable Foundation is committed to protecting and respecting all personal information you share with us and any use of this information is subject to your consent. Our privacy practices are designed to achieve this. To obtain further information and to view our Privacy Policy Statement, please visit

<http://boltonline.org/b-o-l-t-privacy-policy-statement/>

Please be advised that the personal information you provide to BOLT Charitable Foundation in connection with this application will only be used to assess your eligibility for the academic award to which you are applying. As part of the assessment process, your personal information may be disclosed to members of the Selections Committee and/or Board of Directors and award donors, where applicable.

### DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

Incomplete applications will not be considered by the Selection Committee.

If this application leads to a award, I understand that false or misleading information in my application or interview may result in a retraction of the award.

Signature: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_