

## Lake of Bays Community Education Bursary Application Guide

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### A. Program Overview

The Lake of Bays Community Education Bursary is intended to support high school students who otherwise may not have the opportunity to attend a post-secondary education institution. Successful applicants will receive up to \$2,500 in funding.

The funding may be used for post-secondary tuition, books and school related expenses.

Successful applicants will have the funds deposited directly to their student account at their chosen accredited post-secondary institution, upon proof of enrolment at the accredited post-secondary institution, and provision of a student number. The post-secondary institution can be an accredited university, college, trade school or other accredited institution which leads to a degree, diploma or certificate upon completion. The post-secondary institution **must** be a registered charity or qualified donee as per CRA regulations. Most public institutions are, whereas private institutions are not.

### B. Eligibility

To qualify for funding:

- ✓ The applicant must be a high school student, **residing in** the Township of Lake of Bays.  
**Applications received from applicants that do not live in the Township of Lake of Bays will not be considered.**
- ✓ Applications are open to students attending high school in Muskoka (Huntsville High School, Bracebridge Muskoka Lakes Secondary School, St. Dominics Catholic Secondary School).
- ✓ The applicant must be furthering their education at a post-secondary level, which may include attendance at an accredited university, college, trade school or other accredited institution which leads to a degree, diploma or certificate upon completion.
- ✓ The post-secondary institution **must be a registered charity or qualified donee** as per CRA regulations. Most public institutions are, whereas private institutions are not.

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### C. Application Requirements

- ✓ The application must be filled out and signed by the student.
- ✓ The application must be signed by a parent or guardian if the applicant is under the age of 18.
- ✓ All questions must be answered **fully**. There are **16** questions.

**Incomplete applications will not be considered.**

### D. Submission Requirements

Please submit the completed application by email, (preferred) in **PDF format only**, or mail, to:  
Muskoka Community Foundation  
PO Box 35, Bracebridge ON P1L 1T5  
705-646-1220 [info@muskokacommunityfoundation.ca](mailto:info@muskokacommunityfoundation.ca)

**Applications received by email in a format other than PDF, will not be considered.**

### E. Deadline

Application deadline is, **Friday, May 23, 2025 by 12 pm.**

**Applications received after this time will not be considered.**

We will acknowledge that we have received your application.

Muskoka Community Foundation will notify successful applicants by June 13, 2025.

### F. Application Form – what information is required

- ✓ Completely fill out the applicant's name: First Name, Last Name
- ✓ Fill in the applicant's Date of Birth: Month / Day / Year
- ✓ Completely fill out the applicant's physical home address, including the Postal Code
- ✓ Provide the applicant's complete mailing address, if this is different than the physical home address, including the Postal Code
- ✓ Provide the applicant's home phone number and cell phone number. If the applicant does not have either a home phone number or a cell phone number, please fill in the space with N/A (Not Applicable)
- ✓ Provide the applicant's personal email address
- ✓ Provide the name of the High School that the applicant is currently attending
- ✓ Provide the applicant's expected Date of Graduation from the High School that the applicant is currently attending Month / Day / Year

### G. Application Questions – what information is required

Below are the application questions and a short explanation of the answers required.

**Incomplete applications will not be considered.**

1. How did you hear about this fund?

*We are interested in hearing how you found out about this funding opportunity. Did you hear about it from a teacher, from a parent, from a friend? Please be specific.*

2. I will be / have applied to the following post-secondary institutions:

*We need to know the names of the post-secondary institutions to which you intend to apply or have already applied. The course of study that you want to pursue must be included. Also indicate whether or not you have been ~~accepted~~ or if you have not yet received an acceptance confirmation from the post-secondary institution.*

The post-secondary institution can be an accredited university, college, trade school or other accredited institution which leads to a degree, diploma or certificate upon completion. The post-secondary institution **must** be a registered charity or qualified donee as per CRA regulations. Most public institutions are, whereas private institutions are not.

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3. Do you have a Student ID # from a post-secondary institution?  No  Yes

If yes, please provide the name of the post-secondary institution and the Student ID #.

*Post secondary institutions will provide their students with a unique student number upon acceptance. If you have received your student number, please provide this number to us. Successful applicants will have the funds deposited directly into their student account number.*

4. Have you / will you apply for, or receive any other Academic Awards, Scholarships, Bursaries?  No  Yes

If yes, please provide the name of the award, date, and amount.

*Many students apply for other Scholarships, Bursaries, or Academic Awards. At the time of filling out this application to the Lake of Bays Community Education Bursary, you may not have **yet** applied for other Scholarships, Bursaries, or Academic Awards, but you are **planning to apply** in the next few weeks.*

*If you are **planning to apply** for other Scholarships, Bursaries, or Academic Awards, or if you have already applied or received other Scholarships, Bursaries, or Academic Awards, answer “Yes” to this question, **and** provide the name of the award for which you are planning to apply or have applied, the approximate date you will be applying, or the date that you have applied, as well as the approximate **dollar amount** of the funds for which you may be eligible, or has been awarded to you.*

5. Have you or will you apply for Ontario Student Assistance Program (OSAP) funding?  No  Yes

If yes, how much OSAP funding will you request / have you requested?

*Many students apply for OSAP funding. At the time of filling out this application to the Lake of Bays Community Education Bursary, you may not have **yet** applied for OASP funding, but you are **planning** to apply for OSAP funding.*

*If you are **planning to apply** for OSAP funding, or if you have already applied for OASP funding, answer “Yes” to this question, **and** provide the **dollar amount** of funding you will be requesting or have requested.*

6. Has your application for OSAP funding been accepted?  No  Yes

Yes

If yes, how much OSAP funding will you receive / have you received?

*Answer “No” to this question if your application for OSAP funding has been declined.*

*Answer “Yes” to this question if your application for OSAP funding has been accepted and indicate the **dollar amount** of the funding you will receive or have received from OSAP funding.*

7. Do you have access to funds from a Registered Education Savings Plan (RESP)?  No  Yes

If yes, how much RESP income will you access for the first year?

*Many students have access to funds from an RESP.*

*If you do **not** have access to funds from a RESP, answer “No” to this question.*

*If you **do** have access to funds from a RESP, answer “Yes” to this question, **and** indicate the **dollar amount** of the funds that you will be accessing for your **first year** at your post-secondary institution.*

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8. What are your anticipated costs for tuition, room and board and books for the **first year**? Please specify:  
\$ \_\_\_\_\_ Tuition      \$ \_\_\_\_\_ Room & Board      \$ \_\_\_\_\_ Books

*Fill in the anticipated dollar amount that you will be spending on Tuition, Room & Board, and Books during your **first year** at your post-secondary institution.*

9. How much funding are you requesting from the Lake of Bays Community Education Bursary and how would you use the funds?

*We need you to provide us with the **dollar amount** of funds you are requesting from the Lake of Bays Community Education Bursary. Also indicate how you would use the funds received from the Lake of Bays Community Education Bursary.*

What are your plans if you are not successful in obtaining funding from the Lake of Bays Community Education Bursary?

*Let us know how you will come up with funds to pay for your first year of post-secondary education, should you not be successful in obtaining funds from the Lake of Bays Community Education Bursary.*

**Questions 11-16 are to be answered individually, (ie: itemized), on a separate piece of paper.**

10. Tell us about yourself and the reasons behind your chosen course of study for post-secondary education and how you plan to use your post-secondary education.

*We are looking for a short narrative about you, what motivated you to choose the field you want to study in at your post-secondary institution and how you plan to implement your post-secondary education.*

11. Do you have a (part-time) job or volunteer position during the school year? If so, please tell us what you do.

*We are interested in hearing about what jobs or volunteer positions you may have had during the past or current school year.*

12. Extra-Curricular Activities: Describe any interests, sports, achievements or recognitions you have received.

*We are interested in learning about your interests and achievements outside of school.*

13. What did you do last summer?

*Let us know if you had a job, and what did you do in your spare time*

14. What other financial resources are available to you?

*Let us know if you have any other ways of paying for your post-secondary education, other than OSAP, RESP.*

15. How will this funding make a difference to you?

*We are interested hearing about the impact this funding will have on your life.*

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### H. Family Information

This section of the application is to be filled out and **signed and dated** by the applicant's parent or guardian, if the applicant is under the age of 18. The applicant must **also sign and date** the application.

- ✓ Completely fill out the parent / guardian's name: First Name, Last Name
- ✓ Fill in the relationship to the applicant – Father, Mother, Guardian.
- ✓ Completely fill out the parent / guardian's physical home address, including the Postal Code.
- ✓ Provide the Parent / Guardian's complete mailing address, if this is different than the physical home address, including the Postal Code.
- ✓ Provide the Parent / Guardian's Home phone number and Cell phone number. If the Parent / Guardian does not have either a Home phone number or a Cell phone number, please fill in the space with N/A (Not Applicable).
- ✓ Provide the Parent / Guardian's Email Address.
- ✓ Parent / Guardian must sign and date the application.
- ✓ Applicant must sign and date the application.

**Note: By signing this document, the applicant and / or Parent or Guardian:**

- i. expressly acknowledges and consents to release of information as required by Muskoka Community Foundation regarding applications received, decisions made and other matters relating to the granting process and in accordance with the Personal Information Protection and Electronic Documents Act.***
- ii. states that the information provided on the application is true and accurate and that the Muskoka Community Foundation may require supporting documentation be provided.***

### I. Our Contact Information

For more information, please contact:

Lynn DeCaro, Executive Director  
Muskoka Community Foundation  
PO Box 35, Bracebridge ON P1L 1T5  
705-646-1220 [info@muskokacommunityfoundation.ca](mailto:info@muskokacommunityfoundation.ca)  
[www.muskokacommunityfoundation.ca](http://www.muskokacommunityfoundation.ca)

**All decisions by the Muskoka Community Foundation are final and not subject to review.  
Approval of funding does not commit Muskoka Community Foundation to future funding.**



The Muskoka Community Foundation (MCF) is inviting high school students residing in the Township of Lake of Bays to apply for post-secondary education funding. The bursary is intended to support high school students, residing in the Township of Lake of Bays, who otherwise may not have the opportunity to attend a post-secondary education institution. Successful applicants will receive up to \$2,500 in funding.

The funding may be used for post-secondary tuition, books and school related expenses. Successful applicants will have the funds deposited directly into their student account at their chosen accredited post-secondary institution, upon proof of enrolment at the accredited post-secondary institution, and provision of a student number.

**Eligibility:** To qualify for funding:

- a) The applicant must be a high school student, **residing** in the Township of Lake of Bays.
- b) Application to the fund is open to students attending high school in Muskoka.
- c) The applicant must be furthering their education at a post-secondary level which may include attendance at an accredited university, college, trade school or other accredited institution which leads to a degree, diploma or certificate upon completion.
- d) The post-secondary institution must be a registered charity or qualified donee as per CRA regulations. Most public institutions are, whereas private institutions are not.

**THE APPLICATION PROCESS**

1. Complete the attached application – pages 2 and 3. **(Note: there are 16 questions)**
2. Submit the application by email (preferred), **in PDF format**, or mail, to:

Muskoka Community Foundation  
PO Box 35, Bracebridge ON P1L 1T5  
705-646-1220 [info@muskokacommunityfoundation.ca](mailto:info@muskokacommunityfoundation.ca)

**APPLICATION DEADLINE: Friday May 23, 2025 by 12pm**  
Applications received after this time will not be considered for funding.  
Incomplete applications will not be considered.

We will acknowledge that we have received your application, and we will contact you if we need additional information.

Muskoka Community Foundation will notify successful applicants by June 13, 2025.

**All decisions by the Muskoka Community Foundation are final and not subject to review.  
Approval of funding does not commit Muskoka Community Foundation to future funding.**

**For more information, contact:**

Lynn DeCaro, Executive Director  
Muskoka Community Foundation  
PO Box 35, Bracebridge ON P1L 1T5  
705-646-1220 [info@muskokacommunityfoundation.ca](mailto:info@muskokacommunityfoundation.ca)  
[www.muskokacommunityfoundation.ca](http://www.muskokacommunityfoundation.ca)





# Muskoka Community Foundation

## Lake of Bays Community Education Bursary

### Application Form

#### Applicant Information:

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(mm/dd/yyyy)

Address: \_\_\_\_\_  
(include Postal Code)

Mailing Address (if different): \_\_\_\_\_  
(include Postal Code)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

High School currently attending: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_  
(mm/dd/yyyy)

1. How did you hear about this fund? \_\_\_\_\_

2. I will be / have applied to the following post-secondary institutions:  
(Post-secondary institutions must be a registered charity or qualified donee as per CRA)

a) \_\_\_\_\_ Course of Study: \_\_\_\_\_  
Accepted?  No  Yes  Not yet heard

b) \_\_\_\_\_ Course of Study: \_\_\_\_\_  
Accepted?  No  Yes  Not yet heard

c) \_\_\_\_\_ Course of Study: \_\_\_\_\_  
Accepted?  No  Yes  Not yet heard

3. Do you have a Student ID # from a post-secondary institution?  No  Yes If yes, please provide the name of the post-secondary institution and the Student ID #: \_\_\_\_\_

4. Have you / will you apply for, or receive any other Academic Awards, Scholarships, Bursaries?  No  Yes If yes, please provide the name of the award, date, and amount: \_\_\_\_\_

5. Have you or will you apply for Ontario Student Assistance Program (OSAP) funding?  No  Yes  
If yes, how much OSAP funding will you request / have you requested? \_\_\_\_\_

6. Has your application for OSAP funding been accepted?  No  Yes  
If yes, how much OSAP funding will you receive / have you received? \_\_\_\_\_

7. Do you have access to funds from a Registered Education Savings Plan (RESP)?  No  Yes  
If yes, how much RESP income will you access for first year? \_\_\_\_\_

8. What are your anticipated costs for tuition, room and board and books for the **first year**? Please specify:  
\$ \_\_\_\_\_ Tuition      \$ \_\_\_\_\_ Room & Board      \$ \_\_\_\_\_ Books

9. How much funding are you requesting from the Lake of Bays Community Education Bursary and how would you use the funds?  
\_\_\_\_\_  
\_\_\_\_\_

10. What are your plans if you are not successful in obtaining funding from the Lake of Bays Community Education Bursary?  
\_\_\_\_\_  
\_\_\_\_\_

**On a separate page, please respond to the following:**

11. Tell us about yourself and the reasons behind your chosen course of study for post-secondary education and how you plan to use your post-secondary education.
12. Do you have a (part-time) job or volunteer position during the school year? If so, please tell us what you do.
13. Extra-Curricular Activities: Describe any interests, sports, achievements or recognitions you have received.
14. What did you do last summer?
15. What other financial resources are available to you?
16. How will this funding make a difference to you?

**Do you have questions? If so, please contact:**

Lynn DeCaro, Executive Director  
 Muskoka Community Foundation  
 PO Box 35, Bracebridge ON P1L 1T5  
 705-646-1220 [info@muskokacommunityfoundation.ca](mailto:info@muskokacommunityfoundation.ca)  
[www.muskokacommunityfoundation.ca](http://www.muskokacommunityfoundation.ca)

**Family Information:** Name of Parent(s) / Guardian(s):

First: \_\_\_\_\_ Last: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
 (include Postal Code)

Mailing Address (if different): \_\_\_\_\_  
 (include Postal Code)

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (listed above, if applicant is under 18) (mm/dd/yyyy)

**By signing this document, the applicant and / or Parent or Guardian:**

- i. **expressly acknowledges and consents to release of information as required by Muskoka Community Foundation regarding applications received, decisions made and other matters relating to the granting process and in accordance with the Personal Information Protection and Electronic Documents Act.**
- ii. **states that the information provided on the application is true and accurate and that Muskoka Community Foundation may require supporting documentation be provided.**

If any information is found, at any time, to be untrue, any funding provided will be required to be repaid in full.

**APPLICATION DEADLINE: Friday, May 23, 2025 by 12pm**

Applications received after this time will not be considered for funding.  
 Incomplete applications will not be considered.

**All decisions by the Muskoka Community Foundation are final and not subject to review.  
 Approval of funding does not commit Muskoka Community Foundation to future funding.**