



THE ROYAL CANADIAN LEGION ONTARIO COMMAND
CHARITABLE FOUNDATION
&
ROYAL CANADIAN LEGION LADIES' AUXILIARY
ONTARIO COMMAND
BURSARY ASSISTANCE PROGRAM



PURPOSE OF THIS AWARD

The Bursary Program is designed to assist students who are entering or continuing their post-secondary education and who are currently serving members, Ex-service personnel, Legion members, or their spouses, children, or grandchildren. The Bursary Program is funded through the Ontario Command Branches and Ladies' Auxiliaries Charitable Foundation.

FINANCIAL ASSISTANCE

Students applying for assistance may be granted a Bursary based on documented need in the amount of \$1,250.00 per scholastic year as determined by the District Bursary Committee. Students entering a diploma or certificate course, usually of a shorter duration with reduced tuition, may be granted assistance at a rate to be determined by the District Bursary Chair(s). Indentured apprentices may also apply for assistance for the purchase of tools and instruments. Students completing a program through continuing, or distance education maybe considered for the Bursary Program.

ELIGIBILITY

Applicants for this award are required to make an application to OSAP (or its equivalent in other provinces). In addition, applicants must be one of the following to qualify for this bursary:

- Ex-service personnel or currently serving members of The Canadian Forces (Regular, Reserve, and Merchant Navy) or their spouse, child, or grandchild.
- Commonwealth war veterans or their spouse, child, and grandchild.
- An Ordinary and Life member of The Royal Canadian Legion or their spouse, child, or grandchild.
- An Associate member of The Royal Canadian Legion or their child.
- A member of the Ladies' Auxiliary or a child or grandchild of an LA member.
- Stepchildren and step grandchildren may also be considered where applicable.

DEADLINE FOR APPLICATIONS

Applications must be received by Ontario Command prior to the last Friday of March from students who are currently attending post-secondary education. Students changing programs will not be considered.

INSTRUCTIONS FOR STUDENTS

IT IS THE APPLICANT'S RESPONSIBILITY TO COMPLETE AND MAIL THIS APPLICATION DIRECTLY TO THE ADDRESS BELOW

The Royal Canadian Legion reserves the right to authenticate all information pertaining to the application prior to any decision being given. Applicants will be notified by mail as to the decision of the District Bursary Committee; this decision is final and cannot be appealed. Should an application be received missing the required information, the application will be returned one time only for correction & resubmission. **ONLY ORIGINAL APPLICATIONS WILL BE CONSIDERED BY THE COMMITTEE. (DO NOT FORWARD COPIED, EMAILED, SCANNED OR FACSIMILIED VERSIONS).**

Applicants must include the following documents to ensure consideration:

- CLEARLY PRINT Your information in SECTION A below;
- PRINT OSAP Funding Summary;
- PRINT OSAP Application Data on File;
- ATTACH Proof of Service of the Veteran (Ie: Discharge Certificate, Record of Service, or NDI75 Card) **AND**
- ATTACH Proof of Relationship of the Student to the Veteran (required) **OR**
- COMPLETE either SECTION C or D – endorsed by a Legion Branch President, Secretary, or Membership Chair;
- COMPLETE either SECTION E or F **OR** attach a copy of student "Confirmation of Enrollment" from your student profile.

MAILING ADDRESS: The Royal Canadian Legion – Ontario Command
89 Industrial Parkway North Aurora, Ontario L4G 4C4

OFFICE USE ONLY
District _____

APPLICANT DETAILS

Please print or type

Student's full name: _____ Date of birth: D ____ M ____ Y _____

Principal home address: _____ Apt. _____

City/town: _____ Prov: _____ Postal code: _____ Phone: _____

Social insurance number: _____ Email: _____

University, college, school or association attending: _____

Program registered in: _____

FINANCIAL DETAILS

What is the applicant's grand total of all expenses for the year (September to April): \$ _____

Have you applied for the Ontario Student Assistance Program (OSAP) OR equivalent? YES NO

NOTE: APPLICANTS MUST PRINT A COPY OF THEIR OSAP APPLICATION DATA ON FILE AND OSAP FUNDING SUMMARY

Have you received an Ontario Command Legion Bursary in the past (5 years maximum)? YES NO

If so, indicate in what years: _____

Amount of OSAP Loans (which must be repaid): \$ _____ Amount of OSAP Grants: \$ _____

OTHER SCHOLARSHIPS & BURSARIES RECEIVED (if Applicable):

- Name of Scholarship/Bursary _____ Amount \$ _____
- Name of Scholarship/Bursary _____ Amount \$ _____
- Name of Scholarship/Bursary _____ Amount \$ _____

Students may still qualify for this bursary if they have been refused assistance from OSAP or are ineligible to apply. Please provide the Application Data on File and Status Summary confirming your ineligibility. Students completing a program through continuing or distance education maybe considered for the Bursary Program.

Combined net income (line 23600 of tax return) of the parent(s)/guardian(s)
from the previous year (**DO NOT COMPLETE IF YOU ARE A MATURE STUDENT**) \$ _____

Student's income if single/mature student (from all sources) \$ _____

Student's combined income if married (from all sources) \$ _____

Student's total locked in assets (bonds, securities, RRSP, RESP etc.) \$ _____

Student's cash in the bank \$ _____

ADDITIONAL INFORMATION PERTAINING TO STUDENT NEED

To be completed by student. Please provide any information related to this application that is important in assisting the committee with your application, including special conditions, family circumstances, accessibility issues, etc. Should more space be required please attach an additional sheet with your name and address at the top:

ACKNOWLEDGEMENT

I understand that a copy of my application and its contents (personal or otherwise) will be accessible only to members of the Bursary Committee(s) dealing with bursary awards. I also understand that communication with my family may be necessary to clarify information in order to process my application. This information may only be discussed with the members of that committee, with a specific purpose of providing financial assistance towards my education supplement request.

By checking this box, you authorize your parent(s)/guardian(s) to inquire and communicate on your behalf regarding the status of this application.

Signature of Student: _____ Date: _____

PROOF OF ELIGIBILITY

To be completed by the related active service member, ex-service member, Legion or Ladies Auxiliary member. Please use the correct section based upon the status of the family member:

- SECTION B – Active Service or Ex-Service Member
- SECTION C – Legion Members
- SECTION D – Ladies Auxiliary Members

Please note that great-grandchildren of active forces, ex-service personnel, or Legion Members and are not eligible for this bursary, please speak with your local Legion branch about other options.

To be completed by the post-secondary institution. Alternatively, applicants may attach proof of enrollment when submitting this application.

- SECTION E – For University or College enrollment
- SECTION F – Vocational/Apprenticeship enrollment

Applicants may leave all non-applicable sections blank.

SECTION B ACTIVE/EX-SERVICE PERSONNEL: THIS SECTION IS NOT APPLICABLE TO CURRENT LEGION MEMBERS. PLEASE USE SECTION C. A COPY OF THE VETERAN'S DISCHARGE CERTIFICATE OR A COPY OF THE RECORD OF SERVICE OR A COPY OF THE MPRR MUST BE ATTACHED TO THIS APPLICATION. SERVICE DOCUMENTS CAN BE OBTAINED FROM LIBRARY & ARCHIVES CANADA IN OTTAWA. SEND A COPY ONLY. PROOF OF RELATIONSHIP IS REQUIRED.

NAME OF VETERAN _____ DATE OF BIRTH _____

SERVICE NUMBER _____ UNIT SERVED WITH _____

DATE OF ENLISTMENT _____ DATE OF DISCHARGE _____ LIVING/DECEASED _____

WHAT IS YOUR RELATIONSHIP TO THE VETERAN LISTED ABOVE? _____

SECTION C BRANCH MEMBER – MARK AN X IN ONE OF THE FOLLOWING:

DISTRICT _____

ORDINARY MEMBER SELF/ SPOUSE _____ CHILD _____ GRANDCHILD _____

NOTE: IF THE ORDINARY MEMBER (VETERAN) IS DECEASED, PLEASE COMPLETE SECTION B OF THIS APPLICATION INSTEAD.

LIFE MEMBER _____ CHILD _____ GRANDCHILD _____ ASSOCIATE MEMBER _____ ASSOCIATE MEMBER'S CHILD _____

(PRINT) STUDENT'S FULL NAME: _____

NAME OF BRANCH MEMBER: _____ MEMBERSHIP NUMBER _____

BRANCH No.: _____ BRANCH ADDRESS (in full): _____

I CERTIFY THAT _____ IS A LIVING MEMBER IN GOOD STANDING.

AUTHORIZED SIGNATURE: _____ TITLE: _____

PRINTED AUTHORIZED SIGNATURE: _____ DATE: _____

NOTE: AUTHORIZED SIGNATURE IS THE PRESIDENT, MEMBERSHIP CHAIR, OR THE SECRETARY OF THE LEGION BRANCH.

SECTION D LADIES' AUXILIARY MEMBER – MARK AN X IN ONE OF THE FOLLOWING:

DISTRICT _____

LADIES AUXILIARY MEMBER _____ CHILD _____ GRANDCHILD _____

(PRINT) STUDENT'S FULL NAME: _____

NAME OF LADIES AUXILIARY MEMBER: _____ PARENT: _____ GRANDPARENT _____

BRANCH NO.: _____ BRANCH ADDRESS (IN FULL) _____

I CERTIFY THAT _____ IS A LIVING MEMBER IN GOOD STANDING.

AUTHORIZED SIGNATURE: _____ TITLE: _____

PRINTED AUTHORIZED SIGNATURE: _____ DATE: _____

NOTE: AUTHORIZED SIGNATURE IS THE PRESIDENT, MEMBERSHIP CHAIR, OR THE SECRETARY OF THE LADIES' AUXILIARY.

SECTION E COMPLETED BY THE REGISTRAR:

I CERTIFY THAT _____ IS ENROLLED AT

NAME OF UNIVERSITY/ COLLEGE: _____ PROVINCE: _____

ADDRESS: _____

NAME OF PROGRAM: _____ YEAR ENROLLED _____

AUTHORIZED SIGNATURE: _____ DATE: _____

AUTHORIZED PRINT NAME: _____

SECTION F COMPLETED BY THE VOCATIONAL OR APPRENTICESHIP COMMITTEE:

I HEREBY CERTIFY THAT _____ IS ENROLLED AT

NAME OF VOCATIONAL/APPRENTICESHIP COMMITTEE: _____

NAME OF PROGRAM: _____ YEAR ENROLLED IN: _____

AUTHORIZED SIGNATURE: _____ DATE: _____ AUTHORIZED PRINT NAME: _____

SEPT 2023



The Royal Canadian Legion
89 Industrial Parkway North
Aurora ON L4G 4C4

1-888-207-0939

Tel: 905-841-7999

Fax: 905-841-9992

Email: rlontariocommand@on.legion.ca

Website: www.on.legion.ca

RE: 2024-2025 BURSARY GUIDE

I am returning your bursary application for your **completion and return** to this office. To complete the application, please provide the following missing information:

OSAP for 2024- 2025 - Students **must** apply to OSAP (or its equivalent in other provinces) to be considered for bursary. We require 2 documents from OSAP, go to **osap.gov.on.ca**, and print the **“24-25 OSAP APPLICATION DATA ON FILE & FUNDING SUMMARY**. If refused/denied OSAP, you still need to apply for the 2024-25 to show ineligibility. If OSAP estimate shows “O” print the two documents as mentioned above. If your school is not OSAP eligible, you still need to apply for OSAP for 2024-25 and provide a letter from the financial aid office stating ineligibility.

Section B - Ex-Service personnel or currently serving members of The Canadian Forces (Regular, Reserve or Merchant Navy); Commonwealth War veterans - children & grandchildren. You **MUST** provide a copy of either the discharge certificate or record of service for the veteran. Commonwealth War veteran’s documents must show war years (WWII or Korea). Further proof to establish relationship to the veteran is required. **Provide ONE** of the following: (i) copy the veteran’s Obituary Notice (if deceased); (ii) copy of the student’s parents baptismal/marriage certificate or (iii) birth announcement of the student.

“OR”

Sections C or D - Current living members of a Legion Branch/ Ladies’ Auxiliary only If your parent/grandparent is a Branch or Ladies’ Auxiliary member, complete Section “C” or “D”, and have their membership verified by the current President, Secretary or Membership Chairman. **ONLY THESE OFFICERS ARE ALLOWED TO SIGN THE VERIFICATION SECTION OF THE APPLICATION.**

Section E must be endorsed & stamped/sealed by school Print off a copy of the “Verification of Enrollment” or “Confirmation of Enrollment” from your student profile at school. Alternatively, have section e completed by the Registrar’s office. We do not accept letters of acceptance or account statements.

Additional Information Pertaining to Student Need. As the bursary is based on the **financial need of the student**, please state reasons why you believe you are a good candidate (i.e., single family income, retired parents, etc.) to assist us in making a fair decision towards your request.

Emailed/Scanned/ Faxed/Photocopied/Separated applications are NOT accepted.

If you did not apply for OSAP for 2024-2025 your application is automatically rejected.

Others: _____

THE DEADLINE FOR RECEIVING A COMPLETE APPLICATION FROM STUDENTS WHO ARE CURRENTLY ATTENDING POST SECONDARY EDUCATION IS LAST FRIDAY OF MARCH 2025.

Yours truly

Jennifer Leclair
Secretary, Ontario Bursary Program bursary@on.legion.ca

OSAP INSTRUCTIONS

To Print the Funding Summary

Click Login using OSAP information

Click on **MY PROFILE** - then look for **MY APPS – CHECK STATUS**

Click on **CHECK FUNDING – PRINT FUNDING SUMMARY**

To Print the Application Data on File

Login to OSAP

Under "full time applications", click "go to my applications."

Under "go to your applications for other years", select "what's done"

Under what's done, look for "Application form" and the link "view a summary of your application"

Click here and the document should come up. Print/Save it.

IF DECLINED OSAP

Print the "24-25 OSAP APPLICATION DATA ON FILE" and the "STATUS SUMMARY"



Need →

Funding summary

Your Name Here
DURHAM COLLEGE - F.A.S.T. COLLEGE
Sept 5/24 - Apr 19/25

Grants (you keep)



What's done

Below you'll find all of the steps that have been completed

OSAP account profile

Status: Done

Your basic personal information, contact information (including email address) and who can access your information.

[View or change your account profile](#)

Application form

Status: Submitted

Summary of the information you provided on your 2022-23 application for full-time students

[View a summary of your application](#)

Click here to get

Verification

Application

Status: Done



2024-25 Full-time application

Need → Application data on file

ALGONQUIN COLLEGE-OTTAWA/PERTH - Bachelor of Engineering Pathway - Elec Eng Technology
Sep 5/24 - Apr 19/25

Updating your application

Now that your application has been processed, all changes must be made through your financial aid office.

[How to request a change to the information on your application](#)