

GRADUATE STUDENTS' ASSOCIATION



Fall Bursary Application

Due Friday November 10 @ 5:00 PM



Basic Information

Surname: \_\_\_\_\_

Given Name(s): \_\_\_\_\_

Student Number: \_\_\_\_\_

NSID: \_\_\_\_\_

Are you an international student?                      Yes                      No

Have you previously been awarded a GSA Bursary?                      Yes                      No

If you were previously awarded a GSA Bursary, please indicate the year and term: \_\_\_\_\_

Academic Information

Department: \_\_\_\_\_

Program: \_\_\_\_\_

Year of Study: \_\_\_\_\_

Please identify your program type:                      Thesis Based                      Course Based

Please classify your registration status:                      Full-Time                      Part-Time



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**Government Subsidies:** \$ \_\_\_\_\_

**Child Support:** \$ \_\_\_\_\_

**Other Income:** \$ \_\_\_\_\_  
(Spousal Income, etc.)

**Total Personal Income:** \$ \_\_\_\_\_  
(Add together all income categories above)

**Monthly Expenses**

**Housing:** \$ \_\_\_\_\_  
(Including rent / mortgage, property taxes, tenant or homeowner's insurance & utilities)

**Childcare:** \$ \_\_\_\_\_

**Transportation:** \$ \_\_\_\_\_  
(Specify main transport expenses NOT including those expenses incurred through tuition)

**Medical:** \$ \_\_\_\_\_  
(Does NOT include cost of health / dental coverage paid through tuition)

**Tuition (monthly)** \$ \_\_\_\_\_

**Other Expenses:** \$ \_\_\_\_\_

**Total Personal Expenses:** \$ \_\_\_\_\_  
(Add together all expense categories above)

**Is your total household income LESS than your total expenditures?**  
(Monthly Total Expenses > Total Personal Income)

**Yes**

**No**

**If yes, how do you cover these costs?**  
(Personal savings, line of credit, etc.)

\_\_\_\_\_