

The Faculty of Community Services  
School of Child & Youth Care

## **Nancy C. Sprott Award 2011**

The **Nancy C. Sprott Award** will provide financial assistance and recognize the academic achievement of full-time undergraduate students in the School of Child and Youth Care.

The number of awards will vary and the value of each award will be between \$2,000 and \$5,000 based on the number of qualified applicants.

### **ELIGIBILITY**

The Nancy C. Sprott Award is open to full-time students enrolled in the School of Child and Youth Care who are going into second, third or fourth year. To be eligible students must:

- Be a Canadian Citizen, a Permanent Resident or a Protected Person with valid PPS documentation;
- Be an Ontario resident;
- Demonstrate financial need as determined by Ryerson University;
- Demonstrate academic excellence and leadership in areas that exemplify the mission and values of the School of Child and Youth Care;

### **APPLICATION & SELECTION PROCESS**

- Students may be self-nominated or be nominated by their peers or School of Child and Youth Care faculty or staff.
- The student or nominator will submit a letter to the Director of the School of Child and Youth Care explaining how the student meets the award criteria.
- Each application must submit a cover letter including the following:
  - The ways in which his/her values reflect those of the School of Child and Youth Care, specifically compassion and concern for the less fortunate, and a belief in the value of education;
  - The ways in which his/her values reflect the mission of the School of Child and Youth Care;
  - His/her involvement (through volunteer work or employment) in community development and well being;
  - His/her role modeling of healthy and responsible lifestyle choices;
  - Letter must also include affirmation that applicant is a non smoker.
- Each applicant must also provide:
  - One letter of support discussing the applicant's community involvement
  - Resume
  - Ryerson Student Budget Form
  - One-page description of socio-economic barriers to educational advancement faced by the applicant.

### **FOR MORE INFORMATION**

Contact Dr. Sheldon Reinsilber, School of Child & Youth Care  
Email: sreinsil@ryerson.ca  
Phone: 416-979-5000, Ext. 4594

APPLICATION FORM

The Faculty of Community Services  
School of Child & Youth Care

**NANCY C. SPROTT AWARD 2011**

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

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Academic Standing (GPA): \_\_\_\_\_ Year/Level/Courses Completed: \_\_\_\_\_

**LETTERS OF SUPPORT ATTACHED:**

1. \_\_\_\_\_  
Name \_\_\_\_\_ Phone No. \_\_\_\_\_

\_\_\_\_\_ Dept./School \_\_\_\_\_ Letter attached \_\_\_\_\_

2. \_\_\_\_\_  
Name \_\_\_\_\_ Phone No. \_\_\_\_\_

\_\_\_\_\_ Dept./School \_\_\_\_\_ Letter attached \_\_\_\_\_

\_\_\_\_\_  
Signature of Student (If applying on own behalf)

\_\_\_\_\_  
Signature of Nominator/Academic Reference

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

PLEASE SUBMIT APPLICATIONS TO THE SCHOOL OF CHILD & YOUTH CARE, SHE Room 651

**DEADLINE TO APPLY: 4:30 p.m. October 20, 2011.**

## OTSS – Undergraduate Student Budget

# RYERSON UNIVERSITY

Office of Student Financial Assistance

This budget captures an individual student's educational expenses. Tuition fees are for Ryerson undergraduate courses taken September to April (8 months) while on campus. Don't include expenses while on a co-op or work term. Please complete all sections and check the appropriate boxes. Leave the amount blank in the amount field if there is nothing to report. The expense ranges in this budget may be higher or lower than actual expenses. Report actual expenses if lower than the range in the budget. **Ryerson bursary funds supplement not replace the funds a student is expected to contribute to their educational costs.** The expense ranges are intended to promote equality of opportunity and provide a transparent equitable method to assess unmet need. Student budgets submitted with NIL resources will NOT be considered for the bursary/award.

Educational Expenses	Amount	Study Period Resources	Amount
Current year's Tuition fees, no late penalties	\$	Savings (include any funds used to pay current year's tuition fees and other school expenses in the summer months)	\$
Current year's Books and related supplies	\$	Expected/Earned Employment income, Stipends/ Teaching Assistants, etc. during the academic year	\$
Accommodation costs (check one box only). <b>Show up to maximum range or actual cost, whichever is less.</b> <input type="checkbox"/> Away from home with shared rent. Report your share only. Allowable range \$3500 - \$4800. <input type="checkbox"/> Away from home on own. Allowable range \$4700 – \$5800. <input type="checkbox"/> Live in Ryerson residence. Allowable range \$3100 – \$5600 (excludes meal plan) <input type="checkbox"/> Living with family/relatives. Allowable range \$0 – \$1600.	\$	Government student assistance – OSAP loans and grants, QE II Scholarship etc.) Out of Province student loans and grants <b>Specify which one(s)</b> _____ _____ _____	\$
Food (check one box only) <b>Show up to maximum range or actual cost, whichever is less.</b> <input type="checkbox"/> Living away from home or in Ryerson residence. Allowable range \$1800 - \$2500. <input type="checkbox"/> Living with family/relatives. Allowable range \$850 - \$1250.	\$	Bank Line of Credit or Credit Cards Funds available or funds used to pay for current year tuition, other educational or living expenses through a Bank Line of Credit or Credit Cards	\$
Utilities, phone, cable & internet costs (check one box only) Show up to maximum range or actual cost, whichever is less. <input type="checkbox"/> Living away from home or in Ryerson residence. Allowable range \$450 - \$850. <input type="checkbox"/> Living with family/relatives. Allowable range \$250 - \$400.	\$	Other forms of government assistance (Social Services, Orphan/Disability pensions, allowances, etc.) <b>Specify which one(s)</b> _____ _____	\$
Personal/miscellaneous - includes clothing, personal medication, prescription glasses and dental work not covered by private medical/dental insurance. <b>Show up to maximum or actual cost, whichever is less.</b> Allowable maximum up to \$800.	\$	All money/cash/gifts/monthly allowances and/or loans received from parents, spouse/partner or other persons. Include any funds used to pay for tuition fees, books, etc.	\$
Transportation to and from classes only, whether driving or using public transit. <b>Do not include trips home. Show up to maximum or actual cost, whichever is less.</b> <input type="checkbox"/> Within the GTA. Allowable maximum up to \$800 <input type="checkbox"/> Outside GTA. Allowable maximum up to \$950. <input type="checkbox"/> Within walking distance. Transportation costs \$0.	\$	All other sources of income received Check one: <input type="checkbox"/> Ryerson Scholarships/ Awards/ SAG or bursaries <input type="checkbox"/> Educational Scholarship Trust Funds/RRSP's <input type="checkbox"/> Other income (investment dividends, insurance benefits, income tax rebate, etc.) <input type="checkbox"/> Other Scholarships/Awards/Bursaries	\$
<b>Total Educational Expenses (A)</b>	\$	<b>Total Resources (B)</b>	\$
To calculate unmet need: Subtract Total Expenses (A) from Total Resources (B) = unmet need	Unmet Need \$	<b>If your resources (B) are a larger amount that your expenses (A) do not submit this application and budget.</b>	

**Declaration and Understanding: Please check all boxes to be eligible for the bursary/award.**

- I am currently a resident of Ontario and a Canadian Citizen, landed Immigrant or Protected person
- The information I have provided is an accurate representation of my current financial situation. Receipts are available upon request to verify the information listed on the application.
- I understand if the information on this application is intentionally misrepresented this may be a violation of the Student Code of Non-Academic conduct and I may be asked to repay any bursary funding received.
- This bursary will be used to cover educational costs
- I authorize Student Financial Assistance to review my academic record and current address when required.

Student Name (please print) \_\_\_\_\_ SIN # \_\_\_\_\_ Student # \_\_\_\_\_

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

## **CONSENT FOR THE RELEASE AND COLLECTION OF INFORMATION**

I hereby consent to the release and collection of the following information in regard to my application for the Nancy C. Sprott **AWARD**.

**From Ryerson University:**

\* Grade Summary

**From a peer, faculty or staff member:**

- Students may be self-nominated or be nominated by their peers or School of Child and Youth Care faculty or staff

**To be provided by the student:**

- A resume
- One letter of support discussing the applicant's community involvement
- Ryerson Student budget form
- One-page description of socio-economic barriers to educational advancement faced by the applicant
- A cover letter which includes the following;

The ways in which her/his values reflect those of the School of Child and Youth Care, specifically compassion and concern for the less fortunate, and a belief in the value of education

The ways in which her/his values reflect the mission of the School of Child and Youth Care

Her/his involvement (through volunteer work, employment or internship) in community development and well being

Her/his role modeling of healthy and responsible lifestyle choices and

Affirmation that the applicant is a non-smoker.

I understand that these documents are to be viewed only by the School of Child and Youth Care Awards Committee, for the sole purpose of assessing my eligibility for the Award.

I also understand that these documents will be considered confidential, and that the contents of the letter of nomination and Clerkship Preceptor form will not be shared with the student (as permitted under the Freedom of Information and Protection of Privacy Act (FIPPA) Section 49 (c.1)(iii)).

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_

### Protection of Privacy

The information on this form is collected under the authority of the Ryerson University Act and is needed to determine your eligibility for the Nancy C. Sprott Award. The information will be used by The Awards Committee to judge qualified applicants and will not form part of your official student record. In addition, limited information about the recipient(s) of the award including name, program, and year of graduation will be shared with the named donor of the award, and may be shared in the CYC department, and/or Faculty of Community Services newsletter and/or website. This information will be kept on file for one year from the date last used following which time, the record will be destroyed.

### **FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**

This information is collected under the authority of the *Ryerson University Act* and is used by Financial Assistance at Ryerson University for the purposes of determining your eligibility for a financial assistance, including but not limited to financial awards and bursaries. The information collected may also be used on an aggregate basis in order to comply with Ryerson University's statutory reporting obligations. The information you provide will not be disclosed for any other purpose except for as stated herein unless authorized and/or required by law. If you have questions about the collection, use and disclosure of this information by Ryerson University please contact Carole Scrase, Manager, Financial Aid and Awards

In order to assess your eligibility for some forms of financial assistance, we may need to review your academic record. **By checking the box below, you hereby consent to the disclosure of your academic record by the Registrar to Financial Assistance for the purposes of assessing your eligibility for student financial awards and/or assistance.**

**Please note that if you do not consent to the disclosure, we will not be able to determine your eligibility for some forms of financial assistance.**

**NAME:** \_\_\_\_\_ **STUDENT NUMBER:** \_\_\_\_\_  
(Please Print)

**CHECK ONE ONLY:**

- I consent to the disclosure of my academic record by the Registrar to Financial Assistance for the purposes set out above.
- I do not consent to the disclosure of my academic record by the Registrar to Financial Assistance for the purposes set out above. As a result my application may not be considered for financial assistance.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_