

## **Charles A. Root Scholarship**

**\$2,000**

Entrance scholarship for a 1<sup>st</sup> year undergraduate engineering student enrolled full-time in a program within the Faculty of Engineering and Architectural Science.

**Deadline**     **April 16, 2018 at 4:00 pm**

**Eligibility**     Applicants must meet the following criteria:

- Have a record of academic excellence, as demonstrated by a grade of at least an 85% overall average at the end of high school;
- Have been offered admission by the Faculty of Engineering and Architectural Science;
- Demonstrate financial need through the submission of a Student Budget Form;
- Submit a letter outlining their academic and career aspirations;
- Be a resident of Ontario

### **Weighting of Criteria**

<b>Criteria</b>	<b>Weighting</b>
Minimum Entrance Average of 85%	50%
Financial Need	40%
Application Letter	<u>10%</u>
	100%

### **Selection**

The award recipient will be selected by the Office of the Dean, Faculty of Engineering and Architectural Science, based on the weighted criteria. The award funds will be deposited to the student's tuition fee account in August 2018.

In the event where two or more candidates are of equal qualification based on the eligibility criteria, preference will be given to candidates who are the first generation in their family to attend university; and/or are graduates of Campbellford Ontario District High School.

### **Submit your completed application:**

**In person:**     Faculty of Engineering and Architectural Science, Office of the Dean, George Vari Engineering and Computing Centre, 245 Church Street, 3rd Floor, Room: ENG-359, Toronto, ON M5B 1Z2

**By E-mail:**     sothyson@ryerson.ca

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. Do not 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. Student budgets submitted with NIL resources will NOT be considered for the bursary/award/scholarship.

**For each item below enter in the total amount which reflects the full academic year, 8 months. Do not enter the monthly amount only.**

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). Student's portion. Maximum allowed to claim up to \$9600 (\$1200 per month).  <input type="checkbox"/> Single parent/sole caregiver. <input type="checkbox"/> Living with dependants (spouse, children, or family members). <input type="checkbox"/> Living away from home on own or sharing. <input type="checkbox"/> Living in Ryerson residence (excludes meal plan). <input type="checkbox"/> Living with family (no dependants). Claim up to \$3600 (\$450 per month).	\$	Government student assistance - OSAP loans and grants, Out of Province student loans and grants. Enter full year's funding. <b>Specify which one(s):</b> _____ _____	\$
Food (check one box only). Student's portion. Maximum allowed to claim up to \$4000 (\$500 per month).  <input type="checkbox"/> Living away from home, in Ryerson residence, or with dependants. <input type="checkbox"/> Living with family (no dependants). \$2000 (\$250/month)	\$	Ryerson Scholarships, Awards, Bursaries or Student Access Guarantee <b>Specify which one(s):</b> _____ _____	\$
Utilities, telephone, cell phone, cable and internet costs (check one box only). Student's portion. Maximum allowed to claim up to \$800 (\$100 per month.)  <input type="checkbox"/> Living away from home, in Ryerson residence, or with dependants. <input type="checkbox"/> Living with family (no dependants).	\$	Other forms of government assistance (Social Services, Orphan/Disability pensions, allowances, etc.) <b>Specify which one(s):</b> _____ _____	\$
Personal/Miscellaneous Expenses - includes laundry, personal hygiene, clothing, personal medication, perscription glasses and dental work not covered by private or university medical/dental insurance. Costs for students only. Maximum allowed to claim up to \$960 (\$120 per month).	\$	All one time money/cash/gifts and 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. Student costs only. Within the GTA. Allowable maximum up to \$130 per month.  <input type="checkbox"/> Outside GTA . Allowable Maximum \$205/mth (TTC & Go) <input type="checkbox"/> Within walking distance. Transportation costs \$0	\$	All other sources of income received. Check one:  <input type="checkbox"/> Educational Scholarship Trust Funds/RESP's <input type="checkbox"/> Other income (income tax rebate, etc.) <input type="checkbox"/> Other External Scholarships/Awards/Bursaries	\$
<b>Total Educational Expenses (A)</b>	\$	<b>Total Resources (B)</b>	\$
<b>To calculate unmet need:</b> Subtract Total Resources (B) - Total Expenses (A) = unmet need	<b>Unmet Need</b> \$	<b>If your resources (B) are a larger amount than your expenses (A) do not submit this application and budget.</b>	

**Declaration and Understanding: Please check all applicable boxes to be eligible for the award, scholarship or bursary.**

I am a Canadian citizen, permanent resident or protected person.

I am a resident of Ontario.

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 his may be a violation of the Student Code of Non-Academic conduct and I may be asked to repay any award/scholarship/bursary funding received.

This award/scholarship/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

\_\_\_\_\_  
Student Ryerson ID

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date (dd/mm/yy)

## Privacy Consent Form for Student Awards

### SECTION 1 - NOTICE OF COLLECTION - FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT (“*FIPPA*”)

In accordance with Section 39(2) of *FIPPA*, the information provided on the award application is collected under the authority of the *Ryerson University Act, 1977* and is used by Financial Assistance and Award Administrators at Ryerson University for the purposes of determining and adjudicating your eligibility for 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.

All personal information that is collected will be used, disclosed, stored, and destroyed in accordance with Ryerson University’s Procedure for Protecting Restricted Information and Providing Access to Information (see: <http://www.ryerson.ca/policies/board/informationprotectionaccessprocedure.html>) which is part of the Information Protection and Access Policy (see: <http://www.ryerson.ca/policies/board/informationprotectionaccesspolicy.html>).

If you have questions about the collection, use, and disclosure of this information by Ryerson University please contact Manager, Student Financial Assistance: [cscrase@ryerson.ca](mailto:cscrase@ryerson.ca) 416-979-5000 ext 6648.

### SECTION 2 - CONSENT TO DISCLOSE ACADEMIC RECORD TO FINANCIAL ASSISTANCE

In order to assess your eligibility for some forms of financial assistance, we may need to review your academic record.

**By signing below, you hereby consent to: (i) the collection of information for the purposes set out above in Section 1, and (ii) the disclosure of your academic record by the Registrar to Financial Assistance for the purpose of assessing your eligibility for student financial awards and/or assistance.**

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

NAME: \_\_\_\_\_ STUDENT #: \_\_\_\_\_  
(Please Print) (Please Print)

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