



CFFFEP BURSARY APPLICATION

**Canadian Fallen Firefighters Foundation
Fondation Canadienne des pompiers morts en service**

Education Program

BURSARY APPLICATION

Return to:

Selection Committee, CFFFEP
Canadian Fallen Firefighters Foundation
440 Laurier Avenue West, Suite 200
Ottawa ON K1R 7X6

BURSARY AWARD APPLICATION GENERAL INFORMATION

PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

Check the eligibility criteria.

Incomplete applications will not be considered.

If you have any questions, please call us before you submit an application.

Ensure you retain a copy of all your documents because the application package becomes the property of the Canadian Fallen Firefighters Foundation Education Program (CFFFEP) and will not be returned.

Please type or print all your responses.

Applicants should be:

- in their final year of high school or CÉGEP (in QC) if the child of an LODD firefighter recognized by the Canadian Fallen Firefighters Foundation, or
- the spouse/common law partner of an LODD firefighter recognized by the Canadian Fallen Firefighters Foundation and living with the LODD firefighter at the time of their death.

CFFFEP has the sole authority to decide all questions regarding the award of bursaries.

To be eligible for consideration, applications must include:

- A fully completed and signed application.
- Proof of relationship to a firefighter whose line of duty death is accepted by the Canadian Fallen Firefighters Foundation.
- A letter of recommendation from a senior fire service member in the community who is not related to the applicant.
- If a current student, a letter of recommendation from any of a student's teachers or other school official.
- Proof of academic standing.
- Proof of enrolment in a post-secondary institution.



Date Received	Received By (Print):	Signature	Date Forwarded to Selection Committee
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Part 1 – Personal Information

Mr./Miss/Ms./Mrs.
(circle one)

_____	First Name and Initial	Surname
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Mailing Address

_____	Nº, Street
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Permanent Address
(if different from
mailing address)

_____	City	Province	Postal Code
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_____	Nº, Street
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_____	City	Province	Postal Code
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Contact Information

_____	Telephone (with area code)	Cell (with area code)	Email
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Date of Birth mo/dd/yyyy	Gender	<input type="checkbox"/> M	<input type="checkbox"/> F
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Your parent's name	Date of LODDeath
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Part 2 – Academic Information

Name and Address of
the post-secondary
institution accepted at /
applied to / attending
(circle one)

School Name

School Address

Nº, Street

Telephone

City

Province

Postal Code

Course of Study

What is your (planned) major?

What is your career goal?

High School/CÉGEP
Information (if not
attending a post-
secondary institution)

High School/CÉGEP from which you will/did graduate, address and year



Part 3 – Letters of Recommendation (as applicable to status of applicant)

Attach a letter of recommendation from a senior fire service member in the community who is not related to you.

Individual's Name, Title and Department

Nº, Street

Telephone

City

Province

Postal Code

Attach a letter of recommendation from any of your teachers or other school official or other community leader.

Individual's Name, Position and School (as applicable)

Nº, Street

Telephone

City

Province

Postal Code



Part 4 – Declaration

By signing this application, I declare:

1. That I am consenting to the collection of personal information, including my Social Insurance Number (SIN) for taxation purposes, contained in the application package. I understand that this information will be used only for determining my eligibility to receive an award and for ongoing management of the award.
2. That I have answered all questions that are applicable to me and all information is otherwise true and complete.
3. That the CFFFEP Selection Committee may request additional information pertaining specifically to my academic performance and enrolment status for the purpose of determining eligibility for a bursary.
4. That if I receive an award, I agree that my university, degree information and relevant personal information that identifies me as a child of a Canadian LODD firefighter recognized by the Canadian Fallen Firefighters Foundation or the spouse/common law partner of a Canadian LODD firefighter recognized by the Canadian Fallen Firefighters Foundation may be posted on the Foundation's web site and/or distributed in newsletters, press releases, or the Foundation's yearbook *Courage*. I also consent to a picture of myself accompanying any publicity.

Signature of Applicant

Date

Final Checklist

- A fully completed and signed application
- Proof of relationship to the firefighter
- A letter of recommendation from a senior fire service member in the community who is not related to the applicant.
- A letter of recommendation from a teacher other school official or other community leader.
- Proof of academic standing
- Proof of enrolment in a post secondary institution

