

Human Rights Bursary APPLICATION FORM

Student Name:	
School:	
Email Address:	
Home Address:	
Phone Number:	
Post-Secondary Plans <i>(name of institute/program or workplace):</i>	
Supporting YRDSB Teacher Name:	
<p><input type="checkbox"/> I hereby certify that all of the information submitted in my Human Rights Student Bursary Award Application Package is true and all content is original/not taken from other sources.</p> <p><input type="checkbox"/> My application demonstrates and verifies financial need.</p> <p><input type="checkbox"/> If any information in this application is found to be false or inaccurate, I understand that it will result in the removal of my application.</p> <p><input type="checkbox"/> It is my responsibility to confirm with my supporting teacher that they complete the recommendation by the deadline</p>	
For Committee Members:	
<p><input type="checkbox"/> Completed Application Form, including written reflection</p> <p><input type="checkbox"/> Verified YRDSB student</p> <p><input type="checkbox"/> Strong recommendation confirming financial need</p>	

Written Response: