

## **ROSE BRODIE AMBASSADOR SCHOLARSHIP FUND (Previously know as the Timmy/Tammy Scholarship Fund)**

### **History:**

The Ambassador Scholarship Fund was endowed, beginning in 1997, by Cora and Don Brodie, in memory of their mother Rose Brodie, a longtime friend of the children of Easter Seals Ontario.

### **Purpose and Objective:**

In order to recognize in a tangible way the great service rendered to by Easter Seals Ontario **Provincial Ambassadors and Local Ambassadors**(as appointed by the regional Easter Seals Ontario office), the Rose Brodie Scholarship Fund was established to assist former Ambassadors with the cost of post-secondary education or vocational training.

Easter Seals Ambassadors represent all children, youth and young adults with physical disabilities in their community and the Province. They work to promote the understanding of their abilities and achievements by speaking at fundraising and community events.

Applicants will be expected to explore and apply for any government assistance for which they may be eligible and this would be taken into consideration when determining need.

### **Application Process:**

Scholarship candidates will be reviewed, qualified and the successful candidate(s) will be selected by the Scholarship Selection Committee of Easter Seals Ontario. Candidates will be given consideration based on the following criteria:

- Seeking post-secondary education;
- Demonstrate consistent level of scholastic achievement throughout their secondary school curriculum or post secondary curriculum. Applicant must have achieved a minimum grade point average of 75% or equivalent in their previous year of study;
- Participation in extra curricular activities;
- Served as a model and inspiration to fellow students; and
- Former Easter Seals Provincial or Local Ambassador

### **Supporting Documentation:**

You must submit the following documentation with your completed application form:

- A typed, one-page letter from you in which you have outlined your qualifications for the award, including scholastic achievement, motivation, and initiative. In addition, include Easter Seal Ontario volunteer activities you have undertaken in the past year.
- A copy of your secondary and, if applicable, post-secondary transcripts;
- Any interim marks that are available before the deadline date. To be considered valid, interim marks must be submitted on school letterhead and authorized by a school official; and
- Proof of application to applicable alternate sources of financial assistance

In addition, you must ensure that the following references are also submitted by the deadline date:

- An academic reference on school letterhead from your secondary school principal or a current post-secondary institution professor; and
- A current personal reference from an individual who is familiar with your current extra-curricular activities and outstanding characteristics. The letter can not be written by a family member.

**Please note:** the reference letters must be signed and dated and where appropriate provided on official letterhead.

A Social Insurance Number(SIN) is requested for Easter Seals Ontario to issue a T4A statement for income tax purposes.

The Scholarship monies will be forwarded to the successful recipient upon receipt of a letter of thanks to the Donors, Mr. Don Brodie and Miss Cora Brodie and confirmation of enrollment are received. The successful recipient will also participate, if requested, in other methods of recognizing our benefactors. Letters must be received within two months of being notified you are the successful recipient.

Funding is awarded for the upcoming school year commencing in September 2017.

If you are applying for more than one scholarship, an application for each scholarship must be completed, but only one set of supporting documentation is required.

The application form and all supporting documentation must be received by **May 5, 2017** to:

**Scholarship Selection Committee**  
c/o Tina Shier  
Director, Provincial Services  
Easter Seals Ontario  
One Concorde Gate  
Suite 700  
Toronto, ON M3C 3N6

Please remember to review the application form to ensure all information and supporting letters/documentation are provided. **If any information is missing, the application will not be reviewed.** Ensure you keep a copy of the completed form for your files.

If you have any questions, please call Tina Shier at Easter Seals Ontario, (416) 421-8778 Ext. 355 or toll free 1-800-668-6252 or e-mail: [scholarships@easterseals.org](mailto:scholarships@easterseals.org).

**APPLICATION for ROSE BRODIE AMBASSADOR SCHOLARSHIP FUND**

**Surname:** \_\_\_\_\_ **Given Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Mailing Address:**  
\_\_\_\_\_

**City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_ **Your Email:** \_\_\_\_\_

**Previous Recipient of Easter Seals Scholarship: No:** \_\_\_\_ **Yes:** \_\_\_\_

**Name of Scholarship & year awarded:** \_\_\_\_\_

**Social Insurance Number:** \_\_\_\_\_

**Name of Secondary School:**  
\_\_\_\_\_

**Month/Year Attended:**  
\_\_\_\_\_

**Graduated?**

**Yes** \_\_ **No** \_\_

**Proposed Education/Training Program:**

Program/Course Name and Brief Description:  
\_\_\_\_\_  
\_\_\_\_\_

Name of College/University/Institution:  
\_\_\_\_\_

Length of program/course: \_\_\_\_\_ Years to Graduation: \_\_\_\_\_

Have you been accepted: Yes \_\_\_\_ No \_\_\_\_

Course commences: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
day month year

**If attending University or College:**

Name of University or College: \_\_\_\_\_

Qualification/Degree on successful completion: \_\_\_\_\_

What year will you be entering in Fall 2017: \_\_\_\_\_

Years to Graduation: \_\_\_\_\_

**Have you applied to other organizations for funding?** Yes  No

If yes, what organization(s) \_\_\_\_\_

Amount requested: \$ \_\_\_\_\_ Confirmed? Yes  No

**Have you or will you be applying for OSAP?**

Yes

No

**Personal funds you intend to contribute:** \$ \_\_\_\_\_

**Costs to be incurred**

Item	Estimated Costs
Tuition Fees	
Books	
Transportation	
Accommodation(if required)	
Student Activity Fees	
Other(Please specify)	
<b>TOTAL COST</b>	

**Amount of assistance requested from Easter Seals Ontario**

Item	Amount
Tuition Fees	
Books	
Transportation	
Accommodation(if required)	
Student Activity Fees	
Other(Please specify)	
<b>TOTAL COST</b>	

**Check off appropriate:**

**I was a Provincial Ambassador:** Yes: \_\_\_\_\_ Year: \_\_\_\_\_ No: \_\_\_\_\_

**I was a Local Ambassador:** Yes: \_\_\_\_\_ Year: \_\_\_\_\_ Location: \_\_\_\_\_ No: \_\_\_\_\_

**I certify that the information provided in the application is true, correct, and complete to the best of my ability.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

If you are a successful scholarship recipient, do you give permission for Easter Seals Ontario to share your application letter with the scholarship donor. Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Application Deadline**

The application form and all supporting documentation must be received by

**May 5, 2017** to:

Scholarship Selection Committee  
c/o Tina Shier, Director, Provincial Services  
Easter Seals Ontario  
Suite 700, One Concorde Gate  
Toronto, ON M3C 3N6

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