



Jane Sleep Bursary Application

The Jane Sleep Bursary was established to recognize the contributions of Jane Sleep, the very first Executive Director of Jennifer Ashleigh Children's Charity, who remained at the helm of the charity for more than 30 years. Jane believes that all children should be given every opportunity to reach their full potential.

JACC would not be where it is today without Jane's unparalleled leadership and dedication to the children and families we serve.

Eligibility

To be eligible, the applicant must meet the following criteria:

- Applicant must have been previously assisted by JACC;
- Applicant must be pursuing post-secondary education/training/certification leading to employment or independent living;
- Applicant must provide proof of enrollment (for multi-year programs), or proof of completion (for a program that is less than one year in duration)

A successful applicant can only receive the bursary once but may re-apply in subsequent years if not selected.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone: _____ Email: _____

History of your relationship with JACC:

Diagnosis background: _____

Most Recent Education Information

High School: _____ Address: _____

From: _____ To: _____ Diploma: _____

Post-Secondary Course Information

College/
School: _____ Address: _____

Course/
Field of
Study: _____ Course
Length: _____

First year of study
underway? YES NO

Please outline what your costs will be for this program (include all associated costs such as tuition, books, parking/transportation etc.):

Have you applied for/received any other scholarships or financial help towards this program? If so, please describe including amounts already received or awarded:

Tell us about your plans. What are you hoping this course of study will do for you in the future? (You may also include a brief 2-3 minute video with this application if desired).

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that should I be awarded the Jane Sleep Bursary, I give my express permission to Jennifer Ashleigh Children's Charity to share my story and/or image on their website, social media channels, newsletter, etc.

I understand that false or misleading information in my application may require repayment of any bursary amount being awarded.

Signature: _____ Date: _____