



## **Black Foundation of Community Networks**

### *6<sup>th</sup> Annual BFCN Scholarship*

Thank you for showing interest in applying for the 2017/2018 6<sup>th</sup> Annual Black Foundation of Community Networks (BFCN) Scholarship. The BFCN scholarship program was created to recognize outstanding Black students with bright futures as upcoming leaders and dreamers in their communities. This year, BFCN will be awarding two \$1000 scholarships to qualifying students. The first recipient will be a student graduating from secondary school or CEGEP who will be attending an accredited Canadian University or College in September 2017. The second recipient will be a student who is currently pursuing post-secondary studies at an accredited Canadian University or College in September 2017.

#### **Selection Criteria**

- Must identify as a Black student
- Must be graduating high school or CEGEP in June 2017 and attending an accredited Canadian post-secondary institution in September 2017 on a full-time basis **OR** must be currently enrolled in an accredited Canadian post-secondary institution on a full-time basis
- Must have an 80% or higher academic average (for students graduating from secondary school institutions) **OR** must have a 3.0 GPA or higher (for students currently attending post-secondary school institutions)
- Demonstrates financial need, community involvement, and leadership qualities
- Successful candidates must participate in and promote the BFCN #ReadToLead program, an annual reading campaign in March to celebrate Black authors
- Successful candidates must promote the BFCN Scholarship Directory within their networks

#### **How to Apply**

- Complete the application package including all supporting documents
- Submit two reference letters
  - One from a teacher at your high school or CEGEP or post-secondary institution
  - One from a community organization/member
- Mail the package to BFCN by **July 31<sup>st</sup> 2017** (See address below)

#### **Selection**

Award recipients will be selected by the BFCN Scholarship Committee based on the above criteria. The final recipients will be announced in the fall of 2017 and will be presented at our 8<sup>th</sup> Annual BFCN Dinner and Dance Fundraiser on **February 24<sup>th</sup> 2018**. Application packages along with all supporting documents must be received or postmarked no later than **July 31<sup>st</sup> 2017**. E-mail or fax applications will NOT be accepted. Please send all packages to the following address:

Attn: Scholarship Committee  
BFCN Scholarship Program  
6 - 6150 Highway 7  
Suite 431  
Woodbridge, Ontario  
L4H 0R6



## Application Form 2017/2018

### PART A

#### PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: (YYYY/MM/DD) \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Citizenship Status: Canadian Citizen  Permanent Resident  Other \_\_\_\_\_

How did you hear about this scholarship? Check all that apply:

1.  [BFCN Scholarship Directory](#)
2.  BFCN Website: [www.bfcn.ca](http://www.bfcn.ca)
3.  BFCN Social Media ([Facebook](#) OR [Twitter](#))
4.  [Friday Focus](#)
5.  School: \_\_\_\_\_
6.  Other: \_\_\_\_\_

### PART B

#### PROGRAM OF STUDY

Name of Institution: \_\_\_\_\_

Faculty: \_\_\_\_\_ Program: \_\_\_\_\_

Address of Institution: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

(Expected) Start Date: \_\_\_\_\_ (Expected) Date of Completion: \_\_\_\_\_

Years of Program of Study: \_\_\_\_\_

*Please provide proof of acceptance and/or enrollment to an accredited Canadian University or College with your application.*

**EDUCATIONAL HISTORY**

Name of High School or CEGEP: \_\_\_\_\_

Address of Institution: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Certificate or Diploma Completed: \_\_\_\_\_

Date of Attendance: From: \_\_\_\_\_ To: \_\_\_\_\_ GPA/Average: \_\_\_\_\_

*Please provide an up-to-date official transcript with your application.***PART C****EMPLOYMENT HISTORY**

Name of Employer/Organization: \_\_\_\_\_

Position: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Phone Number: \_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Position: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Phone Number: \_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Position: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Phone Number: \_\_\_\_\_



**PART D**

**EXTRACURRICULAR ACTIVITIES**

Activity	Position	Year(s) Involved	Hours Involved

**VOLUNTEER AND COMMUNITY INVOLVEMENT**

<b>Year(s) Involved</b>	<b>Hours Involved</b>	<b>Organization:</b>
		<b>Activity:</b>
		<b>Reference Name:</b>
		<b>Reference Number:</b>
<b>Year(s) Involved</b>	<b>Hours Involved</b>	<b>Organization:</b>
		<b>Activity:</b>
		<b>Reference Name:</b>
		<b>Reference Number:</b>
<b>Year(s) Involved</b>	<b>Hours Involved</b>	<b>Organization:</b>
		<b>Activity:</b>
		<b>Reference Name:</b>
		<b>Reference Number:</b>
<b>Year(s) Involved</b>	<b>Hours Involved</b>	<b>Organization:</b>
		<b>Activity:</b>
		<b>Reference Name:</b>
		<b>Reference Number:</b>









## **PART F**

### **SUPPORTING DOCUMENTS**

#### **i) REFERENCES**

Please include two sealed reference letters from a teacher at your school AND from an organization where you have volunteered. Letters from teachers and community organizations should be printed on letterhead.

##### *Academic Reference*

Reference's Name: \_\_\_\_\_

Reference's Number: \_\_\_\_\_

##### *Community Reference*

Reference's Name: \_\_\_\_\_

Reference's Number: \_\_\_\_\_

#### **ii) OFFICIAL TRANSCRIPT**

Please include an up-to-date official transcript from your high school or CEGEP or post-secondary institution.

#### **iii) PROOF OF ACCEPTANCE/ENROLLMENT**

Please provide proof that you have been accepted to OR are enrolled in an accredited Canadian University or College. A photocopy of the original document is sufficient.

#### **iv) PASSPORT SIZE PHOTOGRAPH**

Please include a passport size head shot photograph to be used in BFCN promotional material if you are selected as a recipient.



I hereby declare that the information I am submitting in support of my application for the 2017/2018 BFCN 6<sup>th</sup> Annual Scholarship is, to the best of my knowledge, correct and complete. I understand that all of the documents I have submitted with this application will not be returned to me.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you very much for applying for the 6<sup>th</sup> Annual BFCN Scholarship. We wish you the best of luck! BFCN has also created an annual Scholarship Directory which is available online [here](#). Please view it for more scholarships available to students like yourself! For any further information regarding BFCN, the Scholarship Program or the Scholarship Directory, please like our page on [Facebook](#), follow us on [Twitter](#) or contact BFCN at:

416-566-2731

[info@bfcn.ca](mailto:info@bfcn.ca)

[www.bfcn.ca](http://www.bfcn.ca)

Twitter: [@BFCN2011](#)

Facebook: [BFCN - Black Foundation of Community Networks](#)

*Together we can achieve success, one student, one adult, one family at a time.*