



## The Dr. Robert L. Cassidy Award in English Studies

**The Dr. Robert L. Cassidy Award in English Studies** is awarded in June to a deserving graduating student, in either a three or a four year English Studies program, who intends to continue studies at either a faculty of education or a graduate school in the fall following graduation.

The granting of the cash award will be contingent on proof of acceptance at a post-graduate institution.

**VALUE:** \$450

### **CRITERIA:**

- Minimum academic average of 80%
- Demonstrated financial need
- Intention to continue studies at either a faculty of education or a graduate school in the fall following graduation

### **APPLICATION PROCEDURE:**

1. Complete all of the sections of this application.  
Note: If you applied for bursary assistance and supplied a budget to the Student Financial Services Office, no further proof of financial need will be required.
2. Include a statement of academic and career-related goals (250 words) with your application.
3. Submit evidence of application to, or acceptance in, a faculty of education or graduate program. A photocopy of the application will be sufficient.

Forward the completed application and supporting documentation to:

Student Financial Services  
Nipissing University  
100 College Drive  
Box 5002  
North Bay, ON P1B 8L7

**Application deadline is April 30**

# THE DR. ROBERT L. CASSIDY AWARD IN ENGLISH STUDIES

Name of Applicant: \_\_\_\_\_  
Surname Given Names

Social Insurance #: \_\_\_\_\_ Student #: \_\_\_\_\_

Degree Program: \_\_\_\_\_ Yr. \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Local Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_  
Home Local

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**Single** or **Combined** Major in English (*Please circle one*)

If Combined Major please state other discipline: \_\_\_\_\_

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Application and/or Acceptance at the following post-graduate institution(s):

Faculty of Education: \_\_\_\_\_  
*Name and Location of Institution*

Date of Application: \_\_\_\_\_ Accepted:  Yes  No  In Progress

Graduate Program: \_\_\_\_\_  
*Name and Location of Institution*

Date of Application: \_\_\_\_\_ Accepted:  Yes  No  In Progress

The information on this form is collected under the authority of the Nipissing University Act, 1992. The University uses relevant personal information on this form to administer scholarships, bursaries, awards, loans, work study, and OSAP for the purposes of determining eligibility, verifying the application and calculating entitlements. The personal information may be disclosed to employees of the university, donors, the federal government, and ministries of the Ontario government for the purpose of notification and verification of the application of any award. If you have any questions about the collection, use, and disclosure of this information please contact the Financial Aid Office, Nipissing University, 100 College Drive, North Bay, ON P1B 8L7, (705) 474-3450 ext. 4297.

**Application deadline is April 30**

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## STUDENT BUDGET for the current school year (not necessary if you completed a Web Bursary application in the fall)

<b>FINANCIAL RESOURCES</b>		
Savings from summer		\$
Previous savings and/or investments cashed for use this year		\$
Earnings during the study period		\$
Family contribution ( <i>include the value of any RESPs paid this year</i> )		\$
Government financial assistance (OSAP, other provincial loans etc.)		\$
Other governmental income (CPP, GST, CTB, etc.)		\$
Scholarships/ Awards /Fellowships/Bursaries		\$
Bank loans		\$
Other ( <i>specify</i> ):		\$
<b>Total Resources</b>	<b>①</b>	<b>\$</b>

<b>ESTIMATED EXPENSES</b>		
Total tuition and compulsory fees		\$
Books/Supplies/Equipment		\$
Rent/residence cost	\$ _____ X 8 months	\$
Utilities/phone	\$ _____ X 8 months	\$
Food	\$ _____ X 8 months	\$
Transportation (local)	\$ _____ X 8 months	\$
Trip home	\$ _____ X 4 trips	\$
Medical/dental costs ( <i>you pay</i> )	\$ _____ X 8 months	\$
Recreation/entertainment	\$ _____ X 8 months	\$
Miscellaneous/personal	\$ _____ X 8 months	\$
Clothing	\$ _____ X 8 months	\$
<b>Total Expenses</b>	<b>②</b>	<b>\$</b>

**Based on the above budget, my calculated financial need is:**

$$\begin{array}{rcc}
 \$ \underline{\hspace{2cm}} & \text{minus } \$ \underline{\hspace{2cm}} & = \$ \underline{\hspace{2cm}} \\
 \text{total expenses} \text{②} & \text{total resources} \text{①} & \text{financial need}
 \end{array}$$

*I certify that the information presented within this application is true and fairly represents my situation.*

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (print) \_\_\_\_\_ Student #: \_\_\_\_\_

**Application deadline is April 30**