Grant Application

Section 1: Student Information

First Name:		Last Name:
Address:		
City:	Postal Code:	Telephone:
Email:		Gender: Male ☐ Female ☐
Birth Date: 18 and under (dd/mm/yyyy)		Sport: Start Date (mm/dd/yyyy)

Section 2: Funding Request

Sport:	School:	
School Address:	City:	Postal Code:
Name of School Contact:	Telephone:	Email:

School Fee Charged to Participate: $_____ **Total Amount Requesting:** $_____ (Not to exceed $250)

Note: BREAKDOWN ONLY FOR FEES ASSOCIATED WITH INTERSCHOOL LEAGUE PLAY

Breakdown of School Fee: Travel $_____ League Fee $_____ Other $_____
Equipment $_____ Facilities $_____

- Has student applied for KidSport funding in the past year? _____(Yes/No)
- Is the applicant receiving/applying for any supplementary funding support? _____ (Yes/No)
  - What amount? $ _____ What is the source? _____

Section 3: Endorsement Requirement

The Endorser MUST be one of the following (check one):

Principal __ Vice Principal __ Athletic Director __ Guidance Counsellor __

The **Endorser** acts as an objective third party who is familiar with the applicant and his/her family and is in a position to identify the financial barriers restricting the student's participation in high school sport.

The endorsement letter is the main tool used to gauge the eligibility of an applicant and it is imperative that the letter includes comprehensive information on the family's current financial state outlining the barriers facing the family.

Barriers may include: Lack of disposable income, large number of dependants, new to country, single parent, job loss, physical/cognitive disability in family, etc.

The endorsement letter must be written on school letterhead with the Endorser's contact information included.
A follow up call to Endorser may be required.

Section 4: Student Eligibility Requirements

- The student applicant must submit a testimony of **100 words or less** as to why this support is important to them. Please be succinct and refer to the physical, social and mental benefits that you will receive.
- The student must circle their response to the following question:

If approved for financial assistance, will the student work with the school to fulfill their commitments as a student (i.e. be on time and regularly attend classes, complete assignments, work towards community service hours, etc.)? **YES** **NO**

_____ _____ _____
Signature **Date** **Witness**

Section 5: Parent/Guardian Authorization

I, _____, (parent/guardian of applicant) agree that all above information is accurate.

_____ _____
Signature **Date**

Once completed please send application and all accompanying documents by mail to:
KidSport Ontario, suite 313-3 Concorde Gate Toronto, ON M3C 3N7 or fax: 416-426-7177