



The Canadian Italian Business and Professional
Association of Toronto
EDUCATION FOUNDATION APPLICATION

The CIBPA represents the Canadian-Italian business and professional community and was founded in 1952 as a not-for-profit organization with the mandate to promote and cultivate the business, professional, cultural and social interests of its members. The goal of the CIBPA Education Foundation Program is to support the academic achievements of young Canadians of Italian heritage.

The CIBPA EDUCATION FOUNDATION Program is open to full-time college and/or university students at the undergraduate, graduate or postgraduate levels who are Canadian citizens or Landed Immigrants permanently residing in Canada and are of Italian origin. It also provides assistance for students who are not of Italian heritage, if they are pursuing curriculum majors in Italian studies.

To be considered by the CIBPA EDUCATION FOUNDATION Selection Committee, a candidate must **have successfully completed a minimum of 12 years of study.**

Please answer each of the questions on the application form and submit the application form with supporting documentation, **on or prior to October 31, 2022.** Only those who have been selected will be contacted by telephone. Illegible applications may be disqualified.

Enclose each of the following support documentation with the completed application form:

- (a) A complete official transcript of marks as of June 30. These transcripts must be forwarded directly to the CIBPA by the educational institution awarding these marks.
- (b) Proof of admission that the student has been officially accepted for full-time studies at a recognized college or university for the school year for which this application is made.
- (c) A passport-size photo.

Provide, if requested by the CIBPA EDUCATION FOUNDATION Selection Committee, verification of information included in the financial section of the application form (i.e., net income for the last income tax year).

The criteria on which the selection process is based are as follows:

- (a) A high-grade point average in the previous year of studies as indicated by the transcript.
- (b) Description of how financial assistance via the CIBPA Education Foundation would be of direct benefit.
- (c) Description of community involvement, volunteer work and/or employment history.

Please address applications, supporting documents and any correspondence to:

The Canadian Italian Business and Professional Association of Toronto

Selection Committee

CIBPA EDUCATION FOUNDATION

901 Lawrence Ave West, Suite 202

Toronto, Ontario M6A 1C3

toronto@cibpa.com

CIBPA EDUCATION FOUNDATION APPLICATION FULL TIME UNIVERSITY & COLLEGE STUDENTS

(Please print legibly or your application may be disqualified)

| | |
|---|--|
| APPLICANT'S NAME _____ Family name at birth _____ First and given names _____ | <input type="checkbox"/> Male <input type="checkbox"/> Female |
|---|--|

| | | | |
|---|---|--|----------------------------------|
| DATE OF BIRTH <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> Month <input type="checkbox"/> <input type="checkbox"/> Day | CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other, specify _____ | NO. OF DEPENDENTS <input style="width: 30px;" type="text"/> | SOCIAL INSURANCE NUMBER _____ |
|---|---|--|----------------------------------|

| | |
|---|-------------------------------|
| MOTHER TONGUE <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Italian <input type="checkbox"/> Other | SPOUSE'S FAMILY NAME _____ |
|---|-------------------------------|

| | |
|---|---|
| APPLICANT'S PERMANENT ADDRESS _____ Number _____ Street _____ Apt. _____ _____ City or Town _____ Province _____ Postal Code _____ _____ Telephone- Residence # _____ Telephone- Cell # _____ Email Address _____ | LANGUAGES SPOKEN WRITTEN English <input type="checkbox"/> <input type="checkbox"/> French <input type="checkbox"/> <input type="checkbox"/> Italian <input type="checkbox"/> <input type="checkbox"/> Other, specify <input type="checkbox"/> <input type="checkbox"/> _____ |
|---|---|

EDUCATION FOUNDATION AWARDS

Have you ever been awarded a CIBPA EDUCATION FUND? Yes No Year(s) _____

(b) Have you received other financial assistance? Yes No Year(s) _____

Loan _____ Amount _____ Source _____

Bursary _____ Amount _____ Source _____

FOREIGN TRAVEL

Africa Europe Asia Australia North America South America

STUDIES
(Circle to indicate years of full time study completed to date, THIS INCLUDES ELEMENTARY SCHOOL)

13 14 15 16 17 18 19 20

PROGRAM OF STUDIES (this fall and winter)

Name of Institution _____ Faculty _____ Specialization _____

CURRENT YEAR STUDIES (ending in June)

Name of Institution _____ Faculty _____ Specialization _____

Year in which you began the program _____ Projected date of completion (month) _____ (Year) _____

PREVIOUS ACADEMIC ACHIEVEMENTS

| | Years | |
|---|--------------------------|--------------------------|
| Diploma or Certificate _____ Specialization _____ Institution _____ | From | To |
| Bachelor _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Masters _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Post-graduate _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> |

CIBPA EDUCATION FOUNDATION APPLICATION

EMPLOYMENT HISTORY (list beginning with most recent – list on separate sheet if necessary)

| Name of Employer | Position | Period: | Part-time/Full-time/Summer |
|------------------|----------|-----------------------|---|
| _____ | _____ | From: _____ To: _____ | <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time <input type="checkbox"/> Summer |
| _____ | _____ | From: _____ To: _____ | <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time <input type="checkbox"/> Summer |

Are you employed while pursuing studies? If yes,
 Full-time
 Part-time
 Summer, other: _____

Employer _____ Position _____

APPLICANT'S INCOME SUMMARY (use separate sheet if necessary)

| | |
|---|----------|
| Total earnings from employment (past year, January 1–December 31) | \$ _____ |
| Other income, specify _____ | \$ _____ |
| Bursaries received or, to be received _____ | \$ _____ |
| Total | \$ _____ |
| Estimated earnings of current year (January 1–December 31) | \$ _____ |

INFORMATION PERTAINING TO PARENT(S) OR SPOUSE

| | | |
|---------------|---|------------|
| Father's name | Address (if different from applicant's) | Occupation |
| Mother's name | Address (if different from applicant's) | Occupation |
| Spouse | Address | Occupation |

CIVIL STATUS OF PARENT(S)
 Married
 Separated
 Divorced
 Mother widowed
 Father widowed

Circle the most applicable condition:
 I am single and live at home with my parent(s)
 I am single and live independently from my parent(s)
 I am married and live at home with my parent(s)
 I am married and live independently with my spouse

Based on the answer circled above, indicate your total NET Annual Income from the last income tax year (i.e., applicant + parent(s), or applicant + spouse, or applicant independent of parent(s) or spouse:

Under \$25,000
 \$25,000-\$50,000
 \$50,000-\$75,000
 \$75,000-\$100,000
 over \$100,000

**** copies of tax returns and notices of assessment to substantiate the amounts may be requested**

SUPPLEMENTARY INFORMATION

Do you or your parent(s), or spouse rent or own your residence?
 Rent
 Own

Do you or your parent(s), or spouse, own an automobile?
 Yes
 No

If, Yes: Year _____ Make _____ Model _____

DO YOU NEED FINANCIAL ASSISTANCE TO CONTINUE YOUR STUDIES? (please attach a separate sheet, if necessary)

SOLEMN DECLARATION

I, the undersigned, do hereby declare that information contained herein and the accompanying documentation is true, accurate and complete and that the supporting documents originate from the appropriate authorities.

Date _____ Signature _____

The Canadian Italian Business and Professional Association of Toronto (CIBPA) Education Foundation

GOALS

Supporting the academic achievements of young Canadians of Italian heritage is the main purpose of the CIBPA Education Foundation. It also provides assistance for students who are not of Italian heritage, if they are pursuing curriculum majors in Italian studies.

STRUCTURE

The Education Foundation is designed as an umbrella organization for a range of supported funds in a single general fund. Funds are supported by a corporation, institute, family, or individual sponsor are named after that sponsor.

MANAGEMENT & SELECTION

Applicants will be evaluated on the basis of academic merit, financial need and community involvement. It is recommended that the applicant submit a letter outlining qualifications, financial need and community involvement, or employment history.

Education Foundation awards are given out yearly. They are presented in person at a CIBPA dinner function held at a public venue to award recipients by a representative of the Named Fund's financial sponsor.

CONTINUING THE TRADITION

The Education Foundation is not an entirely new idea for the CIBPA. For twenty years (from 1957-1976) the Association launched a similar program for helping university students. During that period, 231 students received more than \$30,000 in education funds and grants to continue their education. That earlier CIBPA initiative has since evolved into an independent entity, which has distributed in excess of \$1,000,000.00 to over 1,000 students.

BECOMING A DONOR

As a means of assisting worthy and needy students to attain their educational goals, private individuals and organizations or corporations can make financial contributions to the CIBPA Education Foundation. The following two options are available for this purpose: Individuals can make a \$1,000 contribution for undergraduate studies or a \$3,000 contribution for post graduate studies and establish a "Named Fund" under their name within the Foundation.

Donors at any level may also designate which field of study they wish their donation to go to. For example, Business Administration, Engineering, Medicine, etc.

FOR MORE INFORMATION CONTACT:

The Canadian Italian Business and Professional Association of Toronto
901 Lawrence Avenue West, Suite 202
Toronto, Ontario M6A 1C3
Tel: (416) 782-4445
toronto@cibpa.com

MISSION STATEMENT

The Canadian Italian Business and Professional Association of Toronto (CIBPA) has been in existence since 1952, and has earned an enviable reputation as the premier non-profit membership association that best represents the business and professional interests of Canadian-Italians in the GTA.

Our mandate is to promote and cultivate the business, professional, cultural and social interests of our members, and to be the recognized lobbying voice of the Canadian-Italian community at large. We continue to be the pre-eminent forum for the exchange of ideas and viewpoints, and are focused on the development of business and professional contacts beyond the common practice of networking.

Investing in Canada's Youth—Securing Canada's Future