2023 KEITH COOPER SCHOLARSHIP FUND

INTRODUCTION

In 2002, the Board and staff of Winnipeg Child and Family Services (WCFS) announced the creation of the Keith Cooper Scholarship Fund for children in and from care who wish to pursue post-secondary education. The fund acknowledges the late Keith Cooper, former WCFS Chief Executive Officer and educator, and his commitment to the education of children in Agency care.

The scholarship program draws on funds from the Winnipeg Foundation Gilroy/Acheson account, which has been designated for use by children in care. Formerly a scholarship for WCFS, the Keith Cooper Scholarship Fund is now available to all four Child and Family Services Authorities. The scholarship committee includes representatives from each of the CFS Authorities, VOICES: Manitoba's Youth in Care Network, and Futures Forward. Ten scholarships of \$1,000 are awarded annually. **There are no age restrictions to apply.** Scholarship recipients are also able to re-apply for the scholarship each year of study in order to complete a university degree, diploma, technical or vocational program.

To be eligible applicants must:

- 1. Be currently or formerly in the care of agencies/regional offices delivering child welfare services under the four Manitoba Authorities, or the child welfare agencies that preceded them.
- 2. Have been in the care of a Manitoba child welfare agency/region for more than one year.
- 3. Be pursuing their first post-secondary degree, diploma or certificate program.
- 4. Applied to or currently enrolled in a certificate, diploma, or degree program at a recognized post-secondary institution for the 2023-2024 academic year.
- 5. Be able to meet the institution's entry requirements.

The Panel will then award scholarship(s) based upon the applicant's:

- 1. Financial situation and needs, including and the availability of other financial resources.
- 2. Grades and academic achievement to date.
- 3. Available support system.
- 4. Application received by the deadline: Thursday, June 29th at 11:59pm.
- 5. Selection of the award recipients will be announced by mid-August 2023.

Incomplete or late applications will not be accepted.

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INSTRUCTIONS

Please complete the attached application package. Your completed package should include:

- Pages 3 8 of this application
- A copy of your latest school transcript
- One letter of reference
- Letter of Acceptance (where applicable)

Applicants should complete the entire application and return it to the:

General CFS Authority

Attention: Keith Cooper Scholarship Selection Committee

Email: generalauthority@gov.mb.ca

<u>Only emailed submissions are accepted</u>. Please include 'Keith Cooper Scholarship Application' in the subject line. Send your application, along with all attachments, as **one complete email**. Clear photographs of the required attachments will be accepted if you do not have access to a scanner.

If there are questions regarding the submission of your application, please contact Jennifer Fallis (General CFS Authority) at 204-984-9360.

If assistance in completing the form is required please contact:

Marie Christian

VOICES: Manitoba's Youth in Care Network 3rd floor, 61 Juno Street, Winnipeg, MB R3A 1T1

Email: marie@voices.mb.ca

Phone: 204-982-4956

All completed application packages must be received by <u>Thursday</u>, <u>June 29th</u>, <u>2023 at 11:59pm</u>.

Incomplete or late packages will not be accepted.

Keith Cooper Scholarship Fund Application Form 2023-2024

1. General Information	
Name:	
Address:	
City, Prov., Postal Code:	
Mailing Address (if different from above):	
City, Prov., Postal Code:	
Home Phone:	
Work Phone:	
Cell Phone:	
E-Mail Address:	
Date of Birth:	
Name of CFS Agency:	
Legal Status with Agency:	☐Temporary Ward ☐ Permanent Ward ☐ Other
How long were you in Agency care?	
Agency Contact (optional)	
Name:	
Phone #:	
3. Education	
Last grade completed/date:	
Last school attended:	
Year of Graduation (if applicable):	
4. Educational Plans	
Name of Post-Secondary Institution you have applied to	
Student Identification Number	
Have you received a Letter of Acceptance?	☐Yes ☐No (If yes, please include a copy with your application)

What program do you plan to enter or what degree do you hope to pursue?	
Will your studies be full-time or part-time?	
What is the length of the program?	
When is the program start date?	
Please explain why this area is of interest to you:	
5. Financial Information	
Have you applied for, or are you eliq scholarships, band funding)?	gible for other financial assistance (bursaries, student loans,
Yes	□ No
Will you be receiving financial assis	tance?
☐ Yes, this funding	g has been confirmed
☐ I have applied b	ut funding has not been confirmed yet
☐ No, I have not a	pplied for other financial assistance
Please describe the assistance and	the amount to be received:

Do you have an Agreement w	ith Young Adults (aka Extension of Care)?	
Yes	□No	
Did you receive a Tuition Wai	ver for the 2022-2023 academic year?	
Yes	□ No	
Have you applied for a Tuition	n Waiver for the upcoming 2023-2024 academic year?	
Yes	□No	
Please outline your expenses	for the next year:	
	·	
Tuition:		
Books/Equipment:		
Rent/Mortgage:		
Food:		
Transportation:		
Child-related Expenses:		
Other:		
Total Expenses:		
C. Employment		
6. Employment Are you currently employed?		
☐ Yes, Part-time ☐ Ye	es, Full-time	
Do you plan to work while goi	ng to school? Please describe.	

What is the total financial contribution you plan to make towards your expenses this school year?				
		1		
7. Extracurricular	Activities			
Are you currently involve governance, school club	d in any extracurricular activities? (Volunteering, sports, art, dance, studens, etc.)	ıt		
Yes	□ No			
If yes, please describe.				
Are there extracurricular	activities you would like to pursue in the future? If yes, please describe.			

8. Personal Information

a)	e tell us more about yourself by responding to the following questions: How did you get where you are today?
)	What are your goals for your (near and distant) future?

c)	What steps are you tak	ing to reach your goals?
d)		your life that support you emotionally and are willing to continue supporting thool? Are there other forms of support you think you will need?
9. Aç	greement and Signa	ature
By sub	mitting this application, I	affirm that the facts set forth in it are true and complete.
Name	e (printed)	
Signa	ture	
Date		