Bursary competiton Student
Financial evaluation Services

Winter 2015

This form is to be filled out by students who wish to put themselves forward as candidates in the competition for need - and merit-based scholarships organized by Student Services.

- **ATTENTION : To avoid any compatibilities issues, please download and open this PDF form using Adobe reader.**
- This form has to be filled in on screen. If you are experiencing issues, you can do so and print it at one of the School's Computer Labs.
- This form must be accompanied by the Candidate Application form.
- You must fill in all sections that correspond to your situation.
- Unless otherwise noted, candidates must submit their applications in paper to Student Services (Decelles building, room 5.200).
- Incomplete, misaddressed or inadmissible applications will automatically and without warning be rejected by Student Services.

1- Adress in Quebec during studies

Adress _____ Student number _____

City _____

Province _____ Postal code _____

Specifiy your living arrangments _____

2- Family situation

A- Marital status _____

◦**If you are divorced, single, or a widow(er) :**

Do you have children in you care? ◯ Yes ◯ No

If you answered yes, move on to subsection B to continue filling out this form.

Do you have an undergraduate degree (90 credits minimum)? ◯ Yes ◯ No

If you answered yes, skip subsections B, C and D and continue in section **3- Work**.

Have you worked for at least 24 months at a time without having studies full-time? ◯ Oui ◯ Non

If you answered yes, skip subsections B, C and D and continue in section **3- Work**.

If you answered "no" to all of these questions, skip subsections B and C and continue to fill out the form in subsection D.

◦**If you are married or in common-law partnership :**

Do you have children in your care? ◯ Yes ◯ No

If you answered "yes", complete subsections B and C.
If you answered "no", complete subsection C and D.

B- Children in your care

◦Do you have custody of a child or children? ◯ Yes ◯ No If yes, specify _____

◦Children's information:

First and last name _____ Age _____ Education Level _____

First and last name _____ Age _____ Education Level _____

First and last name _____ Age _____ Education Level _____

First and last name _____ Age _____ Education Level _____

C- Partner's information

First and last name _____

◯ Working (indicate gross income for the year in progress): _____

◯ Studying (specify) Institution _____

Program of study _____

Supported by the Student Financial Assistance? ◯ Yes ◯ No

◯ Not working (details) _____

2- Family situation (cont'd)

D- Parents' situation

◦**Father**

First and last name _____

☐ My father is deceased

Employment _____

Gross income for the year in progress _____

◦**Mother**

First and last name _____

☐ My mother is deceased

Employment _____

Gross income for the year in progress _____

◦**Children in parents' care (including the applicant):**

First and last name _____ Age _____ Education level _____

First and last name _____ Age _____ Education level _____

First and last name _____ Age _____ Education level _____

First and last name _____ Age _____ Education level _____

3- Work

Did you work during the last summer ? ◯ Yes ◯ No

If you did not work, please provide your reason(s) : (max.: 250 characters)

Indicate the number of weeks and the number of hours per week that you worked during the course of the following trimesters.
Write "0" if you did not work.

Trimester	Number of weeks	Number of hours per week
Summer 2014		
Fall 2014		
Winter 2015		

4- Annual budget by trimester of study

Financial resources
Please indicate your total financial resources for each trimester. For the current trimester, you should estimate the total amount. Write "0" (zero) if you have nothing to note.

	Summer 2014	Fall 2014	Winter 2015	Total
Government loans and bursaries programs				
Non-governmental study loans (financial institutions, family, etc.)				
Net revenue (include all work, business and investment revenues) (*)				
Government benefits for children (child support, Canada child tax benefit [CCTB], as well as any other benefit programs)				
Other government benefits (employment insurance, SASQ, CSST, various pensions and annuities, etc.) (*)				
Partner's contribution (include alimony)				
Parental or family contribution				
Scholarships (admission, merit, etc.) (*)				
Other income				

(*) Specific information about financial resources
Please indicate where your net income and government benefits come from, and which scholarships you have received (max. 500 characters):

4- Annual budget by trimester of study (cont'd)

Educational expenses
Indicate the total amount of expenses incurred for your studies for each time period. For the current trimester, you should estimate the total amount. Write "0" (zero) when you have nothing to declare.

	Summer 2014	Fall 2014	Winter 2015	Total
Tuition and related university fees				
Books and school supplies				

Current expenses
Indicate the total for running expenses for each trimester. This total should correspond to your monthly expenses multiplied by four (4). If you share household expenses with other people (partner, house-mate[s] or parent[s]), indicate the portion that you pay. For the current trimester, you should estimate the total amount. Write "0" (zero) if you have nothing to note.

	Summer 2014	Fall 2014	Winter 2015	Total
Rent or mortgage payment (your portion only)				
Electricity, heat, insurance and taxes (your portion only)				
Telephone, internet, cable (your portion only)				
Living expenses for you and children in your care (groceries, cafeteria, hygienic products, diapers, etc.)				
Medical, dental, optometry and other expenses (only indicate the costs not reimbursed by your insurance)				
Public transit				
Automobile costs (payments, maintenance, gas, insurance, etc.)				
Childcare costs				
Other personal current expenses (*)				

(*) Specific information about current expenses
If you wrote a total for "Other personal current expenses," please describe the nature of these expenses (max. 250 characters):

Extraordinary expenses
If applicable, indicate the amount of expenses that make it so you find yourself in exceptional financial hardship. Write "0" (zero) if you have nothing to note.

	Summer 2014	Fall 2014	Winter 2015	Total
Total for extraordinary expenses (*)				

(*) Specific information about current and extraordinary expenses
If you wrote a total for "Extraordinary expenses," please describe the nature of and reason for these expenses (max. 500 characters).

	Summer 2014	Fall 2014	Winter 2015	Total
Total financial resources				
Total expenses				
Surplus / deficit				

5- Financial situation

State of financial resources at time of application submission

Money in bank account	_____		
Investments	_____		
Other assets (real estate, all property worth $1,000 or more, etc.)	_____	Details :	_____
Total	_____		

Debts accumulated as time of application submission

Loans from Student Financial Assistance	_____		
Line of credit (total used)	_____		
Credit cards (unpaid balance)	_____		
Bank loans (including mortgage)	_____	Details :	_____
Sum owed to HEC Montréal	_____		
Other debts	_____	Details :	_____
Total	_____		

Available credit

If applicable, enter the credit limit for your line of credit _____

If applicable, enter the credit limit for your line of credit _____

Automobile

Do you own or rent a car ☐ Yes ☐ No

If Yes, enter the year of purchase or rental _____

Is this vehicle paid off? ☐ Yes ☐ No

Value of your automobile at the time of purchase (write "0" [zero] if the car is rented.) _____

6- Applicant's motivations

- Describe the circumstances and the events that led you to your situation of financial hardship (max. 500 characters):

- Explain how these were inevitable and how their financial impact has (had) a negative effect on your studies (max. 500 characters):

- Detail the efforts you have made to remedy this situation (max. 500 characters):

6- Applicant's motivations (cont'd)

- The Quebec government's loans and bursaries program is the primary source of funding for students in need.

If you are admissible but you have not applied, or if you are not admissible to Student financial assistance, please give the reason(s) (max. 250 characters):

Please describe what steps you have undertaken to find other sources of funding (work, bank loans, parental financial support, etc.) (max. 250 characters):

- In line with your current program of studies, briefly describe what motivates you to keep working on your education and future projects (max. 500 characters):

Have you received a needs-based bursary from HEC Montréal before? ◯ Yes ◯ No

If Yes, please indicate the trimester and the amount given:

Trimester	Year	Total ($)

Required documents for your application

1- The Candidate Application form, duly filled-out and signed

2 - This form (Financial Evaluation)

3 - Copy of the Financial Assistance Statement from Student financial assistance for at least the last month (if applicable)

4 - Copies of children's birth certificates (if applicable)

5 - Copy of lease or any other documents specifying rent

6- Copy of transcript (a copy from HEC en ligne is acceptable)

Submit your application, stapled in the order above, to
Student Services
room 5.200, Decelles building