

## 2024 STUDENT BURSARY APPLICATION

Trinity Legacy Foundation

### Applicant Information

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**Name**

**Address**

**Email**

**Phone**

**Age**     18-25     26- 35     36-44     45 +

### Academic Information

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*Please tell us about the program you will be attending for the 2024-25 academic year*

**Institution Name**

**Degree/Program**

**Field of Study**

**Degree Type**

Undergraduate     Masters     Post-Graduate     Diploma

**Years Completed**

*The Trinity Legacy Foundation supports students pursuing careers that align with our activities, which are based on sharing the Gospel through practical care to those in need. Briefly describe the desired outcomes of your education and how these outcomes relate to the Foundation's own mission and vision:*

Please list any additional educational achievements to date, such as awards, special projects etc:

## Financial Information

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Please provide the following information to the best of your knowledge.

**2024-25 Academic Fees**

**Housing Costs**

**Cost of books and other supplies**

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**Total Cost for the Academic Year**

**Where will you be residing for the duration of the academic year:**

- On Campus Housing/Residence  
 Off-Campus Housing  
 With family

**What is your expected income for the upcoming academic year:**

- Not planning to work  
 \$0-5000  
 \$5,000 - \$25,000  
 \$25,000 - \$50,000  
 \$50,000 +

**If you answered, “Not planning to work”, please check any of the following that apply:**

- Moving to a new city for this degree, and unsure of finding employment  
 Choosing not to work, to focus on courses  
 Course-load restricts opportunities to earn income  
 Other. Please explain:

**If you are under the age of 25, please provide your parent’s annual household income\*:**

*\*Please note that this it does not matter if they are supporting your education or not*

**Please check all that apply:**

- Single  
 Married  
 Supporting additional dependants

If you checked “supporting additional dependants”, please indicate how many:

Are you eligible for any matching grant programs?  Yes  No

### Church Background

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Name of your home church

How long have you attended

Please list your current volunteer and ministry involvement in your local church:

Please list any previous ministry and volunteer involvement with previous churches or para church organizations: