



Federation of Foster Families of Nova Scotia

Suite 350, 99 Wyse Road, Dartmouth, NS B3A 4S5
Telephone: (902) 424-3071 Fax: (902) 424-5199 Toll Free: 1-888-845-1555
www.fosterfamilies.ns.ca

April 1, 2023

Dear Applicant:

The Thelma Goodall Memorial Bursary is a program of The Federation of Foster Families of Nova Scotia. It was established to assist **youth-in-care or former youth-in-care** continuing their education in either a college, university, vocational institution, or other special educational programs. Former recipients of the bursary may re-apply.

The bursary was named in honour of the mother of Elizabeth Hamilton. Elizabeth and her family were active in the foster care community and Elizabeth was one of the people instrumental in beginning the Canadian Foster Family Association.

Bursary Amounts:

When possible, two bursaries of a minimum of \$250.00 and a maximum of \$500.00 will be awarded annually.

Who May Apply:

A youth-in-care or former youth-in-care who is enrolled in an educational program to further his/her skills.

Application Period:

Bursary applications must be postmarked or faxed to the Federation office on or before May 31st of each year.

Application Procedure:

A three-member selection committee made up of one Board Member of the Federation and two community representatives, review all applications and select the recipients. Applicants will be notified of the status of their applications on or before October 1st of each year.

Additional applications are available from your local Foster Family Association, your local agency or district office, or by writing or calling the:

Federation of Foster Families of Nova Scotia
99 Wyse Road, Suite 350
Dartmouth, NS B3A 4S5
Phone: 424-3071 or 1-888-845-1555 Fax: 424-5199

Sincerely,

Selection Committee
Federation of Foster Families of Nova Scotia

**Deadline
for application
May 31**

APPLICATION FORM

THE THELMA GOODALL MEMORIAL BURSARY
For Youth-in-Care or Former Youth-in-Care

Parts A, B, and F of this form must be completed and signed by the applicant. All questions must be answered. *Please use black pen or type. If you require additional space, please use the back of the application or attach an additional sheet of paper.*

PART A—PERSONAL INFORMATION

Name: _____

Address: _____ Postal Code: _____

Telephone: _____ Birthdate: Year _____ Month _____ Day _____

Email: _____

Name of your current or former Child Welfare Agency: _____

Name of your current or former Social Worker(s): _____

PART B—DESCRIPTION OF PROGRAM, GOALS AND ACHIEVEMENT

Describe the program you wish to attend.

1. Name of Program: _____
2. Location of Program: _____
3. Length of Program: _____
4. Start Date: _____
5. Program Cost: _____
6. Other Expenses Related to the Program: _____
7. Brief Description of the Program: _____

PART C—SOCIAL WORKER'S RECOMMENDATION (FORM ATTACHED)

PART D—ATTACH A LETTER OF ACCEPTANCE

PART E ATTACH ESSAY—describing why you have chosen to enter this particular educational program (200 words maximum length)

PART F—APPLICATION DECLARATION

I declare that all the information in this application form is accurate and complete. . I give permission to the Federation to include my name and/or photo in their newsletter. (Name: Yes____ No ____) (Photo: Yes____ No ____)

Signed: _____

Dated: _____

Completed applications must be received by The Federation of Foster Families of Nova Scotia on or before the application deadline.

Send completed form to: Bursary Committee
c/o Federation of Foster Families of Nova Scotia
99 Wyse Road, Suite 350
Dartmouth, NS B3A 4S5
Fax: (902) 424-5199

YOU WILL BE NOTIFIED OF THE STATUS OF YOUR REQUEST AFTER THE SELECTION COMMITTEE COMPLETED THE REVIEW. ONLY COMPLETED APPLICATIONS RECEIVED BY THE APPLICATION DEADLINE WILL BE REVIEWED. Applications received after the deadline will be returned.

SOCIAL WORKER'S RECOMMENDATION

THE THELMA GOODALL MEMORIAL BURSARY

For Youth-in-Care or Former Youth-in-Care

A PROGRAM OF THE FEDERATION OF FOSTER FAMILIES OF NOVA SCOTIA

(NOTE TO APPLICANT: Please give this to the social worker you or your family normally deal with and ask him/her to fill it in and send it in as soon as possible to the Federation office).

PART C SOCIAL WORKER'S RECOMMENDATION

To the Social Worker: The Thelma Goodall Memorial Bursary is a program of The Federation of Foster Families of Nova Scotia. It was established to assist youth-in-care or former youth-in-care who are enrolled in a post-secondary educational program to further his/her skills.

APPLICATION DEADLINE IS **May 31st** EACH YEAR.

APPLICANT'S NAME: _____

SOCIAL WORKER'S NAME: _____

AGENCY: _____ PHONE #: _____

FOSTER PARENT'S NAME: _____ PHONE # _____

ARE THERE REASONS YOU WOULD LIKE TO SEE THIS PERSON RECEIVE THIS BURSARY? (any special accomplishments)

Signed: _____ Dated: _____

Thank you for your assistance. Please send completed form to:

FEDERATION OF FOSTER FAMILIES OF NOVA SCOTIA
99 WYSE ROAD, SUITE 350
DARTMOUTH, NS B3A 4S5
Fax: (902) 424-5199

PLEASE REMEMBER THAT THE DEADLINE FOR APPLICATIONS/RECOMMENDATIONS IS **May 31st**.