

JAIDA CUMBERLAND MEMORIAL EDUCATION GRANT 2015-2016



JAIDA CUMBERLAND MEMORIAL GRANT 2015/2016 Application Form

The Community Living Association for South Simcoe (CLASS), in collaboration with Jaida's Challenge, is currently accepting applications for the Jaida Cumberland Memorial Grant for the 2015- 2016 academic year. The grant shall be awarded in two installments of \$500 over the course of two years. The grant was established in honour of Jaida Cumberland, an inspirational young light who, at the age of 18 months, was diagnosed with a neuro-muscular disorder characterized by severe muscle weakening over time. Despite the severe toll that the disorder took on Jaida physically, she always maintained an incredibly courageous, intelligent, and most importantly, joyous spirit that served, and continues to serve, as an inspiration to family, friends and strangers alike. In recognition of the exceptional support that Jaida received from her dedicated workers both in the community and at home, this educational grant will be awarded to a student enrolled in an accredited college or university course in the field of Developmental Services.

Eligibility:

Applicant must be:

- a registered student in a Developmental Services Worker / Resource Teacher program or in the field of Developmental Services at and accredited college or university.
- a resident of the CLASS service delivery area (New Tecumseth, Essa, Adjala-Tosorontio, Bradford, West Gwillimbury and Innisfil)

Application

In the application, the applicant must include the following:

- o name and contact information
- o record of community involvement
- o why you feel you are deserving of the grant (in 250 words or less)
- o a paragraph describing the applicant's interest in the field of Developmental Services
- o Letter of support: academic or volunteer/employment base
- Proof of registration from an accredited college or university (will be required for each installment)

All information submitted to the Grant Committee will only be used for determining the successful applicant.

The completed application form and supporting documentation must be received by **August 15, 2015** at:

CLASS Grant Committee 125 Dufferin St. Alliston, Ontario L9R 1E9 or

memorialgrant@class.on.ca

^{*}All applications will be reviewed by the Grant Committee.



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Name:			
Address:			
Telephone	<u> </u>	e-mail	
no.			
Cell:		What is the best way to contact you:	
Name of Acc	redited College or l	University:	Year of Study:
Program:			
Check one:	Full time_	Part ti	me
	istration Attached:		
Letter of Sup	port Attached:		
<u></u>			
Describe why	y you feel you are d	eserving of the gra	int:
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Describe you	r involvement in th	e community:	

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Community Involvement continued:			
Describe your interest in the fi	eld of Developmental Services		
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is correct to the best of my kno	declare that the information provided owledge and agree to notify the Grant changes to the application as soon as they		
Signature:	Date:		
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Committee Comments: