

## Application Form CIF Education and Leisure Fund

**The bursary is a maximum of \$400. Applications are randomly selected.**

<b>Personal Information</b>	
Name:	Age:
Address:	Pronouns:
City:	Postal Code:
Phone #:	Email:
Do you have lived experience with: <input type="checkbox"/> Mental Health <input type="checkbox"/> Substance Use	
Have you received these funds before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If YES, when?	
How did you learn about this fund?	
<b>School/Organization Information</b>	
Name:	
Address:	
City:	Postal Code:
Phone #:	Email:
Contact Person:	
<b>Course/Program and Student Information</b>	
Course Name:	
Course Description:	
Tuition Fees & Taxes: \$	
Course #:	Student #:
Start Date*:	End Date:

**\*Start date must be at least 7-8 weeks after application deadline** (to allow time for payments to go through)

*Continue to page 2 for Letter of Intent*

## Letter of Intent CIF Education and Leisure Fund

**Why have you chosen this course/program?  
How would it benefit your wellbeing?**

**Does the course/program cost over \$400?**    Yes    No

**If YES, provide an explanation of how the costs exceeding \$400 will be covered:**

### Submit Application Form

Email: [Megan.Brummitt@vch.ca](mailto:Megan.Brummitt@vch.ca)  
Fax: 604-874-7661  
Mail/drop off at:  
Attn: Consumer Initiative Fund (CIF)  
200-520 W 6<sup>th</sup> Ave  
Vancouver, BC V5Z 4H5

### Questions?

Megan Brummitt - Coordinator  
Consumer Initiative Fund  
604-730-7675  
[Megan.Brummitt@vch.ca](mailto:Megan.Brummitt@vch.ca)