



# AUTISM FOR LIFE FOUNDATION

## AWARDS, BURSARIES, GRANTS, & SCHOLARSHIPS APPLICATION FORM

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

First (Pronoun) Last M.I.

Address: \_\_\_\_\_  
Street Address Unit #

City Province Postal Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### EDUCATION OBTAINED TO DATE

HIGH SCHOOL: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO  
  Certificate: \_\_\_\_\_

BACHELOR: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO  
  Degree: \_\_\_\_\_

TRADES | TECHNICAL \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO  
  Certificate: \_\_\_\_\_

OTHER: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO  
  Certificate: \_\_\_\_\_

### EDUCATION DESIRED

NAME OF INSTITUTION: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Program | Course | Certificate: \_\_\_\_\_

NAME OF INSTITUTION: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Program | Course | Certificate: \_\_\_\_\_

NAME OF INSTITUTION: \_\_\_\_\_ Website: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Program | Course | Certificate: \_\_\_\_\_



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AWARD, BURSARY, GRANT, AND/OR SCHOLARSHIP FUNDING ARE YOU APPLYING FOR?

**Note:** You may apply for all awards, bursaries, grants, and scholarships at once, if you are not selected for an award, bursary, grant, and/or scholarship the first time around and the selection committee is impressed with your application, your application may be kept on file for future consideration (s).

The Autism for Life Artistry Grant up to \$1,500 CAD	<input type="checkbox"/>
The Autism for Life Business Grant to start and/or advance an autistic owned business up to \$5,000 CAD	<input type="checkbox"/>
The Autism for Life Bursary away where between \$1000 - \$5,000 CAD	<input type="checkbox"/>
The Autism for Life Directors Award up to \$2000 CAD	<input type="checkbox"/>
The Autism for Life Scholarship \$1000 - \$5,000 CAD	<input type="checkbox"/>

## THE AUTISM FOR LIFE ARTISTRY GRANT UP TO \$1,500 CAD

If applying for the Artistry Grant, are you apart of YYC BUMP<sup>1</sup>, Calgary Arts Development, and/or any other art program within the country? YES  NO

If yes, explain:

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- i. Please provide a copy of your portfolio (*in lieu of essay's*) with your application. *Scoring value 60/100*
- ii. Describe your plans to spend the grant (*500 words maximum*). *Scoring value 40/100*



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- i. Please describe the following: your business and/or business plans, how long you have been operating for, plans for expansion, if you are incorporated or not, how your business benefits and/or impacts the community, and what your financial status is thus far, and/or any other relevant information. *Scoring value 40/100*

- ii. If you are financially independent from your family, friends, and community, please explain and briefly describe your financial position. *Scoring value 30/100*

- iii. If you are not financially independent, please give a brief description of your financial circumstances (including any financial support from your family). *Scoring value 30/100*



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## THE AUTISM FOR LIFE BURSARY BETWEEN \$1000 - \$5,000 CAD

Our bursary is designed to alleviate poverty and barriers preventing access to the community, employment, and to ensure basic medical care, and mental health services not covered is accessible. Our end goal is to ensure that our beneficiaries are having their most basic needs met.

Please detail the following:

- i. Challenges that you have had to overcome being on the spectrum; and
- ii. How this bursary will help you alleviate your poverty, achieve academic, career, medical, and personal goals. *Scoring value 70/100*

- iii. If you are awarded with the bursary, how do you attend to spend the funds to advance yourself and/or alleviate your poverty to overcome survival mode. *Scoring value 30/100*



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## THE AUTISM FOR LIFE DIRECTORS AWARD UP TO \$2000 CAD

The Director's Award was designed to acknowledge and award those who have not been acceptance by their families, community, and/or institutions, with access to no financial supports, family members, and/or mentors but have been able to navigate the gaps in the system to get themselves where they are today. Our founding director understands that some persons on the spectrum will be abandoned by their family at early ages and wants to intervene to insure that they are given a foundation to begin a supported transition into adulthood. This award will be evaluated based on age of independence, success, community involvement, and financial independence. If you are a person on the spectrum that has been homeless and/or experiencing an unstable living situation since a child, please explain and inform us on how you will use the funds to elevate your poverty.



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## THE AUTISM FOR LIFE SCHOLARSHIP BETWEEN \$1000 - \$5,000 CAD

Our scholarship is designed to ensure that those on the spectrum are able to obtain post-secondary education and advance themselves no matter the circumstances. We will allow beneficiaries to apply for more than one scholarship and will ensure to offer community support to help apply for and obtain other scholarships within the community.

- i. Please provide a description of your post high school training program, ensure to include the following details: school you are attending, program of study, speciality if applicable, and anticipated date of graduation. *Scoring value 10/100*

- ii. Please provide a brief description of your community involvement, volunteer activities, special interests, accomplishments, and/or accolades. *Scoring value 20/100*

- iii. Why specifically do you want to study and/or train in the field that you have chosen?



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- iv. Please provide a brief description (*250 words maximum*) about how being a student on the autism spectrum has impacted your education. *Scoring value 30/100*

- v. Please provide a brief description (*500 words maximum*) of your future education and employment goals. *Scoring value 40/100*



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**For all applicants:** please provide at least one letter of recommendation and/or reference, these letters could be from academia, employment, and/or from a community mentor who is familiar with your accolades, studies, work, community involvement, and/or portfolio whom the awards, bursary, grants, and scholarship committee may approach for a reference.

Please fill out this section below and then please provide the letter with your application via email.

NAME: \_\_\_\_\_ How you met? \_\_\_\_\_

Date of Letter and/or recommendation  
YYYY/MM/DD? \_\_\_\_\_

NAME: \_\_\_\_\_ How you met? \_\_\_\_\_

Date of Letter and/or recommendation  
YYYY/MM/DD? \_\_\_\_\_

NAME: \_\_\_\_\_ How you met? \_\_\_\_\_

Date of Letter and/or recommendation  
YYYY/MM/DD? \_\_\_\_\_

If you have any recommendations for our applications and/or policies and procedure, please describe them below, we are welcoming of any suggestions.

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All details given will be treated in complete confidence!

NOTE: only applications submitted electronically will be considered.

If you have any further queries, please contact [info@autismforlife.org](mailto:info@autismforlife.org)

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date (YYYY/MM/DD): \_\_\_\_\_

YOUR INFORMATION IS BEING COLLECTED UNDER THE AUTHORITY OF THE *PERSONAL INFORMATION PROTECTION ACT (PIPA)* AND *THE HEALTH INFORMATION ACT (HIA)* AND MAY BE USED FOR THE ADMINISTRATION OF AUTISM FOR LIFE FOUNDATIONS OPERATIONS. YOUR PERSONAL INFORMATION IS PROTECTED BY THE PRIVACY PROVISIONS OF *PIPA* AND *HIA*. IF YOU HAVE ANY QUESTIONS ABOUT THE COLLECTION, USE AND DISCLOSURE OF YOUR PERSONAL INFORMATION, CONTACT OUR PRIVACY OFFICER AT [INFO@AUTISMFORLIFE.ORG](mailto:INFO@AUTISMFORLIFE.ORG) FOR FURTHER INFORMATION.