

# FOOTSTEPS FORWARD



## An Education Bursary

The YWCA Thompson is a feminist organization that strives to make a positive difference by promoting a strong presence of women, improving economic situations for individuals, equipping individuals to make informed choices, and making Thompson a safer community for women and children.

The YWCA Thompson Footsteps Forward Bursary aims to provide financial support to individuals who identify as a women or girl and have a desire to advance their learning. This bursary was formerly known as the Joan Johnston Award – specific to high school students enrolled in post-secondary studies. However, in order to be inclusive of all women and girls the bursary was reviewed and changes were made to reflect the diverse needs of our community. There are now 2 bursaries that can be applied for.

### ***Bursary A*** ***Furthering Education***

Will assist with expenses for shorter-term training or programs that do not require enrollment into a post-secondary institute.

**Deadline:** None, continuous intake

- Please allow up to 2 months for a response. Enquiries are possible at any time.
- Bursaries are available for the Thompson region and area

For more information, assistance or a paper copy of this application contact;

Nina Cordell  
Women's Programs Coordinator at  
(p) 204.778.1209 or  
(e) [womensprograms@ywcathompson.com](mailto:womensprograms@ywcathompson.com)

### ***Bursary B*** ***Post-Secondary Enrollment***

Will assist with expenses related to attending a post-secondary institute.  
(Can be full or part-time)

**Deadlines:** June 1<sup>st</sup> or October 1<sup>st</sup>

#### How To Submit Applications

**By mail or in-person:**

YWCA Thompson Attn: Nina Cordell  
39 Nickel Rd, Thompson, MB R8N 0Y5

**By email:**

[womensprograms@ywcathompson.com](mailto:womensprograms@ywcathompson.com)

**By fax:**

204.778.5308



## Bursary A – Furthering Education

This bursary will assist with expenses for shorter-term training or programs that do not require enrollment into a post-secondary institute.

| <b>Section 1 – Personal Information</b>  |    |                      |    |
|--|----|----------------------|----|
| First Name   |    | Middle Name/s        |    |
| Last Name  |    | Date of Birth        |    |
| Main Phone #   |    | Facebook Name        |    |
| Email Address  |    |                      |    |
| Dependents   |    | Relationship         |    |
| Dependents include all children in your care and/or those who live in the home that you are caring for |    |                      |    |
| Mailing Address  |    |                      |    |
| Alternative Address  |    |                      |    |
| Emergency Contact  |    | Main Phone #         |    |
| Emergency Contact Address  |    |                      |    |
| <b>Section 2 – Educational Information</b>   |    |                      |    |
| Name of Program or Training  |    |                      |    |
| Which Group is Offering  |    |                      |    |
| Specify Career/Job of Choice   |    |                      |    |
| Provide Proof of Acceptance (include with application when submitting)                                 |    |                      |    |
| <b>Section 3 – Financial Information</b>   |    |                      |    |
| Applicant's Monthly Income   | \$ | Source of Income     |    |
| Household Monthly Income   | \$ | Monthly Expenses     | \$ |
| Amount Applying For  | \$ | Expense Applying For |    |
| List Other Funding Applied For and Approved Amounts (if known)   |    |                      |    |
| <b>Section 4 – Written Portion</b> (Complete on separate piece of paper or back of page)               |    |                      |    |
| a. What does feminism mean to you?   |    |                      |    |
| b. List 3 challenges you have faced as a woman.  |    |                      |    |
| c. List 3 success you have experienced.  |    |                      |    |
| d. Explain how completing this program or training will benefit yourself and the community.            |    |                      |    |
| e. What are some things that may stop you from completing this?  |    |                      |    |
| f. Do you have people or resources that can support you if needed? Please list them.                   |    |                      |    |

For more information or assistance contact;  
 Nina Cordell, Women's Programs Coordinator  
 (p) 204.778.1209 (e) womensprograms@ywcathompson.com



## Bursary B – Post-Secondary Enrollment

This bursary will assist with expenses related to attending a post-secondary institute. (Can be full or part-time)

| <b>Section 1 – Personal Information</b>  |    |                      |    |
|--|----|----------------------|----|
| First Name   |    | Middle Name/s        |    |
| Last Name  |    | Date of Birth        |    |
| Main Phone #   |    | Facebook Name        |    |
| Email Address  |    |                      |    |
| Dependents   |    | Relationship         |    |
| Dependents include all children in your care and/or those who live in the home that you are caring for |    |                      |    |
| Mailing Address  |    |                      |    |
| Alternative Address  |    |                      |    |
| Emergency Contact  |    | Main Phone #         |    |
| Emergency Contact Address  |    |                      |    |
| <b>Section 2 – Educational Information</b>   |    |                      |    |
| Name of Program or Training  |    |                      |    |
| Which Group is Offering  |    |                      |    |
| Specify Career/Job of Choice   |    |                      |    |
| Provide Proof of Acceptance (include with application when submitting)                                 |    |                      |    |
| <b>Section 3 – Financial Information</b>   |    |                      |    |
| Applicant's Monthly Income   | \$ | Source of Income     |    |
| Household Monthly Income   | \$ | Monthly Expenses     | \$ |
| Amount Applying For  | \$ | Expense Applying For |    |
| List Other Funding Applied For and Approved Amounts (if known)   |    |                      |    |
| <b>Section 4 – Written Portion</b> (Complete on separate piece of paper or back of page)               |    |                      |    |
| g. What does feminism mean to you?   |    |                      |    |
| h. List 3 challenges you have faced as a woman.  |    |                      |    |
| i. List 3 success you have experienced.  |    |                      |    |
| j. Explain how completing this program or training will benefit yourself and the community.            |    |                      |    |
| k. What are some things that may stop you from completing this?  |    |                      |    |
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