



The Don McBain Memorial Award- Financial Need Form

Please print and sign this form then submit along with your supporting documents.

1. Budget for first year of post-secondary education

	Fall Semester	Winter Semester
Tuition Amount (\$)		
Housing (\$)		
Books/Reading Materials (\$)		
Technology (\$)		
Transportation (\$)		
Personal Needs/Additional Supports (\$)		

2. Total amount of financial need and income of household

Total funds required for first-year of post-secondary education: \$ _____

Total income of your current household: \$ _____

Note: The total income of your current household is composed of the yearly income of members in your household including your parent(s) and guardian(s), as well as your yearly income.

E.g. Parent #1 (\$xx) + Applicant (\$xx) = Total income of current household

All fields in this form must be completed with accurate information to qualify for the award.