

**THE ANGLICAN FOUNDATION OF CANADA  
THE LEWIS S. GARNSWORTHY MEMORIAL TRUST**

80 Hayden Street, Toronto, ON M4Y 3G2

Phone: 416-924-9199, exts. 253 or 322 Fax: 416-924-8672

foundation@anglicanfoundation.org

**BURSARY APPLICATION FORM**

**CRITERIA**

- A. The trust will cover up to a maximum of 50% of the total cost of a project. This percentage is not guaranteed and depends on funds available and the number of applications received.
- B. Applicants will be allowed a maximum of three (3) applications only with at least a one-year interval between each application.
- C. Each successful candidate is expected to report back in writing about his or her studies.
- D. Support is required from the appropriate area bishop. A space for the bishop's signature is found at the bottom of page 2 of this form.
- E. The advisory committee of the Garnsworthy Trust meets in May each year. Applications must be submitted to the office of the Anglican Foundation of Canada by April 1<sup>st</sup>.

**PROJECT**

1. Applicant's name, home/mailling address, telephone number and email:

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

Home/Mailing Address: \_\_\_\_\_

\_\_\_\_\_

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

2. Parish or Professional Position: \_\_\_\_\_

3. Basic Information about Course of Study:

a. Title: \_\_\_\_\_

b. Location of sponsoring institution: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Please enclose a course outline, if available.)

c. Dates of course: \_\_\_\_\_

4. On a separate sheet, please outline your reasons for choosing the course and your expectations from it. (Please attach the sheet to the application form for submission)

5. Total Cost Involved:

a. Transportation: \$ \_\_\_\_\_

b. Fees: \$ \_\_\_\_\_

c. Board & Room: \$ \_\_\_\_\_  
d. Other: \$ \_\_\_\_\_  
**Total:** \$ \_\_\_\_\_

6. Grant amount requested from the Garnsworthy Trust: \$ \_\_\_\_\_

7. Proposed sources for the balance of funds required: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Have you arranged to have time away from your parish or employer? Yes \_\_\_ No \_\_\_

9. Project comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Are you currently a member of the Anglican Foundation of Canada? Yes \_\_\_ No \_\_\_

Signature: \_\_\_\_\_  
(Applicant) (Date)

**Signature:** \_\_\_\_\_  
(Area Bishop) (Date)

**Bishop's Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: One (1) copy must be submitted to the office of the Anglican Foundation of Canada.

SUBMIT TO: The Lewis S. Garnsworthy Memorial Trust Fund  
The Anglican Foundation of Canada  
80 Hayden Street, Toronto, ON M4Y 3G2