



BACKPACKING
WITH A
PURPOSE

OPERATION GROUNDSWELL

FINANCIAL ASSISTANCE APPLICATION

You can type directly in this PDF - just save it to your desktop first!

PERSONAL DETAILS

Name: _____

Date of Birth: _____

Email Address: _____

First Choice OG Program: _____

FINANCIAL DETAILS

Please complete every field below. Write N/A if not applicable. Specify currency.

TOTAL YEARLY INCOME SEPTEMBER 2015 TO SEPTEMBER 2016	
Employment Income	
Family Contributions	
Loans (or other aid to be repaid)	
Bursaries, Grants, or Scholarships (or other aid without expectation of repayment)	

TOTAL YEARLY EXPENSES SEPTEMBER 2015 TO SEPTEMBER 2016	
Housing and Utilities	
Food and Other Necessities	
Transportation	
Phone, Internet, Cable, Other Media	
Tuition and School Supplies	
Other Expenses	

TOTAL INCOME MINUS TOTAL EXPENSES	

Please mail this completed form along with a brief letter outlining your financial situation to:

Forms will not be accepted by email.

Operation Groundswell
Financial Assistance Committee
200-205 Church St.
Toronto, ON
M5B 1Y7 Canada