



CENTRAL OKANAGAN BURSARY & SCHOLARSHIP SOCIETY

A Gift That Lives and Grows

#1 – 616 KLO Road
Kelowna, BC V1Y 4X4

Telephone 250 861-4980
Email: cobss@shaw.ca

Fax 250 861-4913
www.cobss.ca

NEW DONOR CONTRACT – 2012

(Please read letter following before completing contract)

_____ herein donates to the Central Okanagan Bursary and Scholarship Society (COBSS), for the purpose of awarding _____ bursaries/scholarships/awards in the amount of \$ _____ each
Number of awards

to assist students enrolled in and graduating from public and private member secondary schools within School District No. 23 in the Central Okanagan to further the selected students' post-secondary education.

The completed contract is necessary in order to prepare the application which is distributed to students in early January. Please return this contract, **together with your cheque** payable to COBSS no later than **December 1, 2011**. Thank you for your commitment to the education of students in our community.

INSTRUCTIONS TO COBSS

Name of Bursary/Scholarship/Award _____

Definitions – Bursary – need for financial assistance Scholarship – achievement of academic excellence Award – any criteria the donor specifies

Participating Schools – Central School, George Elliot, Kelowna Secondary, Mount Boucherie, Okanagan Mission, Rutland Senior Heritage Christian, Immaculata, Kelowna Christian, L'Anse-au-sable, Okanagan Adventist Academy

Please specify:

Specific School(s) Please list: _____ All Schools _____ Only SD#23 Public Schools _____ Only Independent Schools _____

Criteria to be met by the recipient of this bursary/scholarship (**be brief and specific**)

PLEASE CHECK (✓) APPLICABLE ITEM

Bursary/Scholarship/Award to be: _____ Reviewed Annually

Recipient to be selected by: _____ Donor or _____ COBSS Representative

Bursary/Scholarship/Award presented by _____ Donor or _____ COBSS Representative

In the event a bursary/scholarship/award remains unclaimed after the expiry date, I would like to instruct COBSS to do the following: **PLEASE CHECK (✓) APPLICABLE ITEM**

_____ allocate an additional bursary/scholarship/award in the same amount in the next award year

_____ increase bursary/scholarship/award amount in the next award year

_____ retain funds in account

An annual administration fee of \$25 will be charged for **EACH** bursary/scholarship/award.

Enclosed is my cheque for	\$ _____	Amount of Bursary/scholarship/award
	\$ _____	Plus \$25 administrative fee per bursary/scholarship/award
	\$ _____	TOTAL ENCLOSED

Contact Person: _____ Phone: _____

Address: _____ Postal Code: _____

Alternate Contact Name _____ Phone _____

Address for Alternate Contact _____ Postal Code _____

Email Address of Contact Person _____ Email Address of Alternate Contact _____

Organization or Business Name: _____

Signed: _____ Date _____



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October 2011

Dear Donor:

To ensure that allocations are consistent with your wishes, we ask that donors carefully provide the information below.

NAMING YOUR DONATION:

Donors should be aware that the designation of bursary/scholarship/award determines the primary criteria for allocation.

Bursary - If you name your donation a bursary, COBSS will consider the primary criteria to be met by the recipient to be a **need for financial assistance** in order to pursue studies at a post-secondary level.

Scholarship – If you name your donation a scholarship, COBSS will consider the primary criteria to be met by the recipient **to be the achievement of any criteria the donor specifies**.

Award – If you name your donation an award, COBSS will consider the primary criteria to be met by the recipient **to be any criteria which the donor specifies**.

Now that you have determined the designation for your donation, please enter it on the donor contract. For example: Okanagan Opera Singers Bursary or Okanagan Opera Singers Scholarship or Okanagan Opera Singers Award.

ESTABLISHING CRITERIA FOR YOUR DONATION:

Once you determine the name (primary criteria) for your donation, please list the primary criteria first under criteria on the donor contract. Then list all other criteria, in the order of priority, you wish to be considered for allocation purposes. Examples of other criteria which you may wish to include are: potential for his or her chosen field, citizenship and involvement within school and community, membership in the donor organization.

Criteria for your bursary/scholarship/award are as follows:

It is further understood that bursaries/scholarships/awards will be awarded to students in full-time attendance at a post-secondary educational institution recognized by the Society, immediately upon graduation. Monies are to be claimed by March 1st of the following year. Selection of recipients will be made by the COBSS Allocation Committee or by the donor (as indicated on the donor contract). The selection will be guided by the criteria and instructions provided by the donor. In order to qualify for consideration, a student must provide COBSS with a complete comprehensive COBSS application. To be eligible for COBSS awards, students must proceed to a post-secondary institution immediately upon graduation. Monies from awards must be used by March 1 of the following year.

Please note that if there has been no contact from your organization for more than two years, COBSS has the sole discretion in allocating any remaining funds.

Thank you for consideration of this information in completing your donor contract and your continued support of Central Okanagan students.

Yours truly,

Janet Kluffinger

Janet Kluffinger
President

Pauline Kirk

Pauline Kirk
Administrative/Financial Assistant