

# SUMMER PROGRAM IN FRENCH FOR LEVEL I STUDENTS 2019

## Eligibility Criteria

To be eligible, a candidate must:

1. be a Canadian citizen or landed immigrant and be a permanent resident of the province of Newfoundland and Labrador.
2. be a full-time Level 1 student during the 2018-19 school year.

## Application

1. Photocopies of the following must accompany all applications (DO NOT SEND ORIGINALS): proof of Canadian citizenship or landed immigrant status (Birth certificate is acceptable for Canadian-born applicants or passport);
2. The Teacher Recommendation form;
3. The deadline for receipt of applications is **12:00 noon, Newfoundland time, April 18, 2019;**
4. It is the responsibility of the applicant to ensure that the application, whether mailed/emailed or faxed, is received at the Programs and Services Division by the deadline date.

## Selection

1. Applicants who did not participate in the Grade 9 Bursary Program 2018 will be given priority over any other applicants.
2. Bursaries will be awarded by random selection.
3. Once first-time bursary applicants have been processed, remaining applicants will be selected randomly.
4. Successful applicants will be assigned a bursary at **Collège Saint-Charles-Garnier**, Québec City campus.
5. Application status will be communicated, by email, by May 2, 2019.
6. Unsuccessful applicants will be queued in a wait list. Any cancelled bursaries will be offered, randomly, to wait list applications. **No bursaries will be awarded after June 1<sup>st</sup>, 2019.**
7. Candidates who wish to cancel their bursary must contact the Programs and Services Division immediately. This must be followed by a **written confirmation of cancellation**. *Failure to do so may result in the candidate being ineligible to participate in other NL bursary programs.*

## Late applications

1. Applications received after 12:00 noon, April 18, 2019, will only be considered once all other applicants have been awarded a bursary.
2. Late applications will be prioritized based on date received.

3. No bursaries will be awarded after June 1<sup>st</sup>, 2019.

### **Administration**

1. Bursaries will be paid directly to Collège Saint-Charles- Garnier.
2. Bursaries will cover the cost of tuition, registration fee, room and board, instructional materials and all compulsory activities. They will not cover the cost of optional excursions.
3. Bursary recipients will be responsible for their own transportation costs and pocket money.
4. The Programs and Services Division will contact the institution on behalf of the successful candidates. The institution will then forward the information regarding the online registration to bursary recipients.

### **Accommodations**

Bursary recipients will live on campus, in student residences.

### **Liability**

It is the responsibility of parents and guardians to assess the suitability of the participant for this program. The Department of Education and Early Childhood Development gives no representation or warranty of any kind as to instruction, activities, accommodation or other services provided to students by Collège Saint-Charles-Garnier. Applicants, parents or guardians shall address inquiries on any such matters to the institution.

### **FOR ADDITIONAL INFORMATION, CONTACT:**

**Brigitte Allain**

Programs and Services Division  
Department of Education and  
Early Childhood Development

P. O. Box 8700

St. John's, NL A1B 4J6

[brigitteallain@gov.nl.ca](mailto:brigitteallain@gov.nl.ca)

Website: [www.ed.gov.nl.ca/edu/k12/french/bursaries.html](http://www.ed.gov.nl.ca/edu/k12/french/bursaries.html)

Telephone: 709-729-2741

Facsimile: 709-729-1400

**Funding for this program is being made available through the *Canada-Newfoundland and Labrador Agreement on Minority-Language Education and Second Official-Language Instruction.***

### **PRIVACY NOTICE**

Personal information collected on this form is protected by the *Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015)* and is used solely for the purposes of the administration/operation of the Summer Program in French for Level I Students provided by the Programs and Services Division of the Department of Education and Early Childhood Development (EECD). This information is kept confidential and held securely as required by *ATIPPA, 2015*. If you have any questions about the collection or use of this information, please contact the Policy and Information Management Division of EECD at 709-729-6281.



For Office Use Only	
Date Received	File Number

**SUMMER PROGRAM IN FRENCH FOR LEVEL I STUDENTS 2019**  
**Sunday, June 30, 2019 (Arrival) to Friday, July 26, 2019 (Departure)**  
 (Note: Please wait to get confirmation from Collège Saint-Charles-Garnier before making airline reservations)

Last name	First Name	Initial	Date of Birth ____/____/____ YYYY/MM/DD	Social Insurance Number ____/____/____
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<b>Mailing Address</b> <u>Email:</u>	Cell:
St./Blvd./Ave./Rd./Box/Cres./Pl.      City/Town      Province      Postal Code	Telephone (Home):

**I received a bursary through the Summer Program in French for Grade 9 Students 2018**      Yes       No

**Applicant's Declaration**  
 I declare that all information provided is complete and true. I have read and accept the conditions stated on the reverse side of this form and wish to apply for a bursary. I authorize the release of the above information for administrative purposes only.

\_\_\_\_\_  
 (Signature)      \_\_\_\_\_  
 (Date)

**Parent or Guardian** *(to be completed by a parent or guardian of the applicant)*

Name:	Relation to applicant:	Cell:
Email:		Telephone (Home):

I, \_\_\_\_\_, do certify that I have read the general information on the Summer Program in French for Level I Students 2019 and I hereby grant permission for \_\_\_\_\_ to attend French Summer School at Collège Saint-Charles- Garnier, Laval University campus, Québec City.

\_\_\_\_\_  
 (Signature)      \_\_\_\_\_  
 (Date)

I hereby grant permission for the Programs and Services Division of the Department of Education and Early Childhood Development to release our telephone number to other participants in the Summer Program in French for Level I Students 2019. (Please note that this is to enable participants to consider travelling together. It will NOT affect an application in any way.)

\_\_\_\_\_  
 (Signature)      \_\_\_\_\_  
 (Date)

**School Principal** *(to be completed by principal of school attended by applicant)*

Name of School: _____	I hereby certify that _____ is a Level I student at this school during the 2018-19 school year.
SEAL OR STAMP <i>If you do not have a seal or stamp, please certify the above student's status on stationery bearing your letterhead.</i>	_____ SIGNATURE OF PRINCIPAL

**FORWARD APPLICATION TO:** *brigitteallain@gov.nl.ca*, Department of Education and Early Childhood Development, Programs and Services Division, P. O. Box 8700, St. John's, NL A1B 4J6      Tel.: 709-729-2741      Facsimile: 709-729-1400



## TEACHER RECOMMENDATION FORM

### Summer Program in French for Level I Students 2019

**To be completed by a teacher teaching the applicant in the current school year**

Note to teacher: This program is designed to accommodate students at different skill levels, from beginners who may not speak any French, to advanced French students, who may be relatively at ease in French.

Applicant's name \_\_\_\_\_

School attended 2018-19 \_\_\_\_\_

This student is currently enrolled in:     Core French     FI     Neither

I have taught the above-named student in the current school year, and feel he/she is a suitable candidate to participate in a 4-week summer course in Québec. I recommend him/her as a student who will make the commitment to spend 4 weeks in Québec, and participate enthusiastically in a program to improve his/her French language skills and provide him/her with a deeper understanding of French Canadian culture.

Teacher's name \_\_\_\_\_

Signature of teacher \_\_\_\_\_

Date \_\_\_\_\_

**This form must be included with the student application for the Summer Program  
for Level I Students.**