

Application Deadline: April 15th, 2025

FORM A: TEACHER BURSARY PROGRAM 2024-2025

The Richmond Association for Montessori (RAM) makes bursaries available to assist Montessori teachers who wish to deepen their Montessori education. This program provides bursaries to teachers at all levels who wish to continue their education in the Montessori field.

ELIGIBILITY

To be eligible:

- Applicants must be currently employed in the Richmond School District as a teacher in the Montessori program.
- The training activity must be related to the Montessori field.
- Training must take place during the current or previous year (a limit of one annual application per calendar / course year to the maximum of \$1,000 per year, \$1,200 or \$1,500 for subsequent years of a Certification Program) ▪ All applications must be submitted by April 15th, 2025.

BURSARY PRIORITIES AND AMOUNTS

RAM is able to support bursary applications based on the following, in order of priority:

| Priority | Type | Year 1 | Year 2 | Year 3 and subsequent years |
|----------|---|--|---|--|
| 1 | Training (Certificate, Diploma, Degree) | Up to \$1,000 (proof of registration) | Up to \$1,200 (proof of continuing registration) | Up to \$1,500 (payment upon completion of training) |
| 2 | Course | Up to \$1,000 | | |
| 3 | Mentorship | Up to \$1,000 | | |
| 4 | Conferences/Workshops 1 st come, 1 st served, as funds allow | Up to \$500 | | |

Should the opportunity arise for a private speaker to be arranged for the group of Montessori teachers in the Richmond District, and funds allow, RAM would, as a last priority, consider helping to fund the cost of the speaker.

APPLICATION PROCEDURE

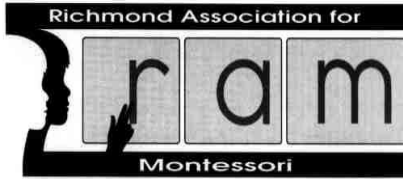
- It is the responsibility of the applicant to ensure that the fully completed application form and letter of request is submitted to the Richmond Association of Montessori Executive, along with all requested documentation by the deadlines noted above.
- Only completed and fully documented applications will be considered. Incomplete applications may be returned.
- For RAM records, please provide proof of completion after course is done.

PAYMENT OF BURSARIES

- Applicants will be notified by email of the decision and the amount to be paid with respect to their application.
- Cheques will be issued to the applicant after verification of enrolment or continued enrolment in the program (if applicable).

ADDITIONAL INFORMATION

- Questions or requests for additional information can be directed to any of the RAM Executive, or by email at: info@richmondmontessori.ca
- Pre-approval procedures are outlined in Bursary Funding and Payment Structure memorandum (1/2017), where a \$300 payment may be conditionally approved throughout the year, with further considerations once final application deadline has passed (this is done to ensure fair allocation for all applicants of the bursary program).



Application Deadline: April 15th, 2025

TEACHER BURSARY APPLICATION 2024-2025

APPLICANT INFORMATION

| | | | |
|----------|--|----------------------------|--|
| Name: | | | |
| Address: | | | |
| City: | | Postal Code: | |
| Phone: | | E-mail address: | |
| School: | | Division & Grade Teaching: | |

TRAINING INFORMATION

| | | | |
|--|------|-----------------|---------------|
| Name of Institution: | | City: | |
| Name of course(s), training, workshop, etc. You must attach a copy of course description(s) or a description of the request with this application form. | Cost | Number Of Hours | Course Length |
| | | | |
| | | | |
| | | | |

DECLARATION OF SCHOOL PRINCIPAL

The applicant's assignment is:

Full Time
 Part Time (%)

Temporary (assignment length:)

| | | |
|------------|---------------|-------|
| Signature: | Printed Name: | Date: |
|------------|---------------|-------|

APPLICANT'S DECLARATION

I declare that all the information given above is complete and true in every respect, that I have answered all questions applicable to my case, and that I meet the eligibility requirements outlined on the reverse side of this form.

| | |
|-------------------------|-------|
| Signature of Applicant: | Date: |
|-------------------------|-------|

FOR RAM USE ONLY:

| | | | |
|-----------------------------------|-----------------------------------|--------------------------|---------------------|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Declined | Amount Committed:\$_____ | Cheque Number:_____ |
| Signature of RAM Executive | | Date: | |
| Signature of RAM Executive: | | Date: | |