CANADIAN HERO FUND®

Spousal Scholarship Application for the 2026-2027 Academic Year

The information given in this form is for the exclusive use of the Canadian Hero Fund (the "CHF") in determining your eligibility for a scholarship. It will be kept strictly confidential.

Application Requirements

1. This form and additional required documentation must be submitted to the CHF at the address noted below.

2. Additional documentation to be submitted with the application includes:

    a. A copy of your most recent federal income tax return;
    b. A recent pay cheque stub;
    c. Official transcript from your current educational institution or last year of educational studies (if applicable);
    d. Proof of acceptance to the post secondary institution you intend to attend;

3. Please ensure that your name is written on any documents submitted with your application.

4. If you have any questions regarding the application process, please contact the CHF at info@herofund.ca or (888) 602-3071.

Purpose of Scholarship

The purpose of the available scholarship is to assist the surviving spouse of a Canadian Forces member who has fallen while serving their country in the course of theatre/training/regular prescribed duties, to upgrade their employment skills by attending a post secondary institution for a professional or trades training program.

These scholarships are intended to assist surviving spouses to secure an independent source of support or to augment an existing source of support in order to re-establish financial stability.

Criteria for Eligibility

In order to qualify for a CHF scholarship, a candidate must meet the following criteria:

1. Been married or living common law with a Canadian Forces member who has fallen while serving their country in the course of theatre/training/regular prescribed duties;

2. The spouse must not have been remarried at the time the scholarship is first applied for;

3. The spouse must have been married or living common law with the fallen Canadian Forces member for 1 year immediately preceding the soldier's death;

4. The spouse must apply for the scholarship within 2 years after the Canadian Forces member's passing;

5. The spouse must be enrolled in an undergraduate degree or certificate program;

6. The spouse must be enrolled for a minimum of 5 credit hours, per term at an eligible post secondary institution; and

7. The spouse must, unless there is a justifiable cause, maintain a minimum annual grade average of 50%.

Distribution of Scholarships

Kindly note, all scholarship decisions are made solely by the CHF based on the funds available to the CHF.

Scholarship funds are limited and not everyone who is eligible for a scholarship may receive one in any given year. If in any given year, there are insufficient funds to provide scholarships to every eligible candidate, scholarship decisions will be based on the greatest need among eligible candidates as determined solely by the CHF.

It is the responsibility of the CHF Scholarship Committee to review all submitted applications. The Scholarship Committee is comprised of members of the CHF, and educators. Based on its review, the Scholarship Committee will provide funding recommendations to the CHF's board of directors (the "Board") based upon the following factors:

1. Financial need. Preference will be given to candidates for whom the awarding of a scholarship would increase the likelihood of the applicant being able to attend a post secondary institution;

2. Likelihood applicant will successfully complete their academic program; and

3. Past scholastic achievement.

Final decisions with respect to funding are made by the Board upon the recommendation of the Scholarship Committee. These decisions are final.

Scholarship applications are available online in PDF format via www.herofund.ca .

Canadian Hero Fund Scholarship Applications must be submitted by mail, email or fax.

By Mail:

Canadian Hero Fund
55 Bloor Street West
PO Box 19532
Toronto, Ontario
M4W 3T9

By Email:

info@herofund.ca

By Fax:

(888) 602-3071

2026-2027 Spousal Scholarship Application

Name: _____

Social Insurance Number: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Daytime Phone: _____ Evening Phone: _____

Email: _____

Please list information for fallen Canadian Forces member:

Name: _____

Date of Death: _____

Academic Information for Applicant:

Name of post-secondary institution to be enrolled at (or enrolled at):

_____

Number of years required to complete program: _____

Year of program currently entering: _____

Dependent Information

Please list the names and ages of other dependents:

Name(s) & Age(s): _____

School(s) Attending: _____

Are you paying tuition? ____ Yes ____ No Tuition Amount: _____

Income: _____

Occupation: _____

Monthly Gross Salary: _____ Additional Income: _____

Employer: _____

Employer's Address: _____

Additional Information

Please list any additional sources of income not included above:

Source: _____ Annual Amount: _____

Please list any additional expenses that you would like considered in determining eligibility for financial assistance.

Expense: _____ Annual Cost: _____

Expense: _____ Annual Cost: _____

Expense: _____ Annual Cost: _____

Expense: _____ Annual Cost: _____

Enablement: Amount of tuition, which you would be able to pay annually, that would enable you to attend a post secondary institution.

Amount: _____

Any special circumstances you would like the Scholarship Committee to consider (Please attach a separate document if required):

Personal Statement

Please submit a 1-2 page typed personal statement that:

1. Describes the main financial and personal obstacles currently being experienced by your family;

2. Describes how the completion of the academic program will assist you and your family to alleviate financial and personal hardship;

3. Describes how you will balance your current and future activities regarding school/work/personal demands while enrolled in your chosen academic program. You may wish to include past examples; and

4. Include any unique qualifications or strengths in personality or character as well as any special qualities that may set you apart from other applicants.

Applicant's Statement

I have read and understand the policy for granting of scholarships by the Canadian Hero Fund guidelines for the 2026-2027 school year.

I declare that the foregoing statements are true and correct, and I authorize the CHF to make any reasonable and necessary inquiries that may be required to verify the above information.

Applicant's Signature: _____ Date: _____