Indigenous Bursary Application

Clear form

For full-time students

Revised: October 2025

Eligibility and Instructions:

1. HSA provides two $2000.00 bursaries to Indigenous students from BC who are continuing or proceeding in any HSA-related field leading to a recognized certificate, diploma, or degree at a public post-secondary educational institution. Note: Registered Nurse, Residential Care Aid, and Licensed Practical Nurse are not HSA related occupations. For more information on accepted professions, please see the Eligible Occupations list (see pages 7 and 8). If you have any questions about whether the occupation you have selected is eligible, email BursaryScholarshipApplication@hsabc.org.
2. Applications are ranked by the HSA Education Committee and bursaries will be awarded based on the financial need, personal statement, special circumstances, and commitment to pursue education in an HSA-related field.
3. Awards must be claimed by November 30 of the year in which they are awarded. Previous HSA scholarship or bursary winners are ineligible.
4. Applications must be completed in full to be considered.
5. Generative Artificial Intelligence (AI) submissions will not be accepted.
6. Please send one email that includes your application to BursaryScholarshipApplication@hsabc.org.
   Applications may be mailed if electronic submission is not possible.
7. Applications must be received by the HSA office or post-marked by Friday, January 9, 2026, at 11:59pm to be considered. Funds will be awarded upon verification of registration and attendance in the course/program.
8. All financial information will be kept in confidence in accordance with the Personal Information Protection Act.

Indigenous Bursary Application

Please Answer all Applicable Questions

1. First and Last Name _____

2. Email _____

3. Mailing address _____

   City _____ Postal Code _____

   Province _____ Phone number _____

4. Education goals and anticipated HSA-related career: _____

   Have you confirmed your occupation is an Eligible Occupation? ☐ Yes ☐ No

   (See attached list of Eligible Occupations and email BursaryScholarshipApplication@hsabc.org if you have any questions).

5. Have you been awarded this bursary before? ☐ Yes ☐ No

6. Indigenous Ancestry: ☐ Métis ☐ Inuit ☐ First Nations (status or non-status)

   If you have a Band or registration number, please provide it below.

   Band Name and Number: _____

   Registration Number: _____

7. Program of studies and post-secondary institution for upcoming academic year:

   _____

8. Last two education institutions attended:
   Name of Institution Location Date of Attendance

   _____

   _____

9. Do you have a RESP? ☐ Yes, amount $_____ ☐ No

10. a) Are you eligible for a Canadian or Provincial Student Loan? ☐ Yes ☐ No

    b) If yes, have you applied for a Student Loan? ☐ Yes ☐ No

    If not, please give the reason:

    _____

    _____

11. If you are Status First Nations or Inuit, have you applied to your band for education funding?

    ☐ Yes If yes, what was the response? _____

    ☐ No If no, please give the reason: _____

12. Total current educational debt? _____

13. Are you financially independent of your family? (i.e., maintain a separate residence year-round and receive minimal financial support). ☐ Yes ☐ No

14. What was your last year's income? _____

15. Financial information for one academic year:

Tuition, Books, & Incidental Fees	Transportation	Housing/Living Costs	Total Costs

16. How will you be paying for your education?

    Self/Savings _____% Loans _____% Spouse/Family _____%

17. Where will you be living during the academic year?

    ☐ Parents/Family ☐ Own home ☐ Rental Residence ☐ Other

* Questions 18 & 19 can be submitted in writing, or you may opt to send a video of yourself providing the answers. The video should be no longer than five minutes for both questions. The video must be uploaded to Google drive. Once uploaded please share the link to BursaryScholarshipApplication@hsabc.org.

18. Please let the committee know why you are looking for financial assistance. Please include details on any additional financial or other challenges you face that you want the selection committee to consider, i.e., medical condition or extenuating family circumstances requiring additional finances, single parenthood, etc. (Maximum of 250 words)

19. Personal Statement:

Tell us why you decided to enter your chosen field. Why are you passionate about this area? What do you hope to achieve? (Maximum of 250 words)

I confirm that all the information provided is correct, and I consent to HSA collecting, using, and disclosing my personal information in accordance with the following privacy statement.

HSA is committed to using the personal information we collect in accordance with applicable privacy legislation.

☐ By completing this form, I am consenting to have HSA use the submitted information for the purposes of determining whether I am eligible for a bursary.

☐ I am consenting to HSA publishing my name in a list of bursary winners in an HSA publication, if HSA awards me a bursary.

Signature: _____ Date: _____

Submit to:

Education Department:	180 East Columbia	**Telephone**	**Toll free**
BursaryScholarshipApplication@hsabc.org (Attach .pdf)	New Westminster BC, Canada V3L OG7	604-517-0994	1-800-663-2017
		Facsimile	**Facsimile toll free**
		604-515-8889	1-800-663-6119

Eligible Occupations

(Other appropriate HSA-related professions may be considered)

- Administrative Support Worker
- Anesthesia Assistant
- Aquatic Therapist
- Art Therapist
- Audiologist
- Behaviour Interventionist
- Behaviour Support Consultant
- Bioinformatics Technologist
- Biomedical Engineering Technologist
- Biostatistical Analyst
- Cancer Research Technologist
- Cardiac Exercise Specialist
- Cardiology Technologist
- Cardiopulmonary Technologist
- Child Life Specialist
- Child and Youth Counsellor
- Clinical Counsellors
- Clinical Exercise Physiologist
- Combined Laboratory/X-Ray Technologist
- Community Case Manager
- Computer Services Support Worker (IT Admin)
- Computational Biologist
- Counsellor
- Cyclotron Operator
- Cytogenetics Technologist
- Cytotechnologist
- Dental Hygienist
- Dietitian
- Diagnostic Neurophysiology Technologist
- Diagnosis Vascular Technologist
- Disciplines Allied to Social Work (formerly Social Program Officer)
- Early Childhood Educator
- Education Consultant
- Educator
- Electroneurophysiology (ENP) Technologists including:
  - Electroencephalography (EEG)
  - Electromyography (EMG)
  - Evoked Potentials (EP)
  - Electronystagmography (ENG) and Polysomnography
- Environmental Health Officer
- Genetic Counsellor
- Genomics Technologist
- Health Information Management Administrator
- Hospice Counsellor
- Infant Development Program (IDP) Consultant
- Infection Control Practitioner
- Kinesiologist
- Legal Advocate
- Librarian
- Licensing Officer
- Massage Therapist
- Medical Imaging Technologists including:
  - Angiography
  - Cardiac Sonographer
  - CT Technologist
  - Diagnostic Medical Sonographer
  - Fluoroscopy
  - General Radiography
  - Interventional Radiology
  - Magnetic Resonance Imaging Technologist (MRI)
  - Medical Radiation Technologist (x-ray)
  - Mammography
  - Nuclear Medicine Technologist

Medical Laboratory Technologist
Mental Health Counsellor
Mental Health Liaison
Mental Health Worker
Molecular Genetics Technologist
Music Therapist
Neuromuscular Technologist
Occupational Therapist
Orthoptist
Orthotic Aid Fabricator
Orthotics Technician
Orthotist
Outreach Support Worker
Palliative Care Counsellor
Pathologists Assistant
Podiatrist (Orthopaedic Shoemaker)
Perfusionist
Pharmacist
Physics Assistant
Physiotherapist
Physiotherapist/Occupational Therapist (Dual Registered)
Polysomnography Technologist
Preschool Teacher
Program Coordinator
Prosthetics Technician
Prosthetist
Psychologist
Psychometrist (Testing Technician)
Public Health Engineer
Public Health Inspector
Quality Assurance Specialist
Radiochemist
Radiation Therapist
Radiation Therapy Service Technologist
Radiological Technologist
Radiopharmaceutical Chemistry Technologist (Radiochemist)
Recreation Therapist
Rehab/Recreation Support Worker
Rehabilitation Counsellor
Registered Psychiatric Nurse
Remedial Gymnast
Research Assistant
Research Coordinator
Residential Support Worker
Resource Coordinator
Respiratory Therapist
Respite Care Coordinator
Seating Devices Technician
Social Worker
Speech Language Pathologist
Spiritual Care Practitioner
Substance Use Counsellor
Support Worker
Supported Child Development Consultant
Supported Child Care Consultant
Transition Services Coordinator
Victim Services Worker
Vocational Counsellor
Volunteer Resources Coordinator
Youth Care Counsellor

Contact BursaryScholarshipApplication@hsabc.org if you have questions about other HSA related fields.

Financial Need Rubric

Three points maximum

Criteria	Level 1	Level 2	Level 3
Financial Need	Minimal Financial Need	Modest Financial Need	Great Financial Need

Special Circumstances Rubric

Three points maximum

Criteria	Level 1	Level 2	Level 3
Special Circumstances	Minimal Special Circumstances	Modest Special Circumstances	Exceptional Special Circumstances

Personal Statement

Three points maximum

Criteria	Level 1	Level 2	Level 3
Commitment to pursing education in an HSA-related field	Minimal Commitment	Modest Commitment	Exceptional Commitment