

PMA Dependents' Tuition Scholarship Plan

Subject to plan conditions, dependent children of current, regular full-time PMA eligible employees are eligible to receive tuition benefits for full-time studies taken for credit towards a degree from Western University. This application is tenable for courses taken between September 2026 and April 2027. **This application is for scholarship consideration for studies during the 2026-27 academic year only.** This application is not to be used for scholarship consideration for the 2027-28 academic year.

Scholarship Plan Conditions

Subject to the following conditions, **dependent children*** of CURRENT, REGULAR FULL-TIME PMA EMPLOYEES are eligible to receive tuition benefits for full-time studies taken for credit towards a degree (undergraduate or graduate) from Western University. The benefit will be offered to qualified students for the equivalent of a maximum of four years of full-time registration, not necessarily consecutive, at Western University. "Full-time" is defined in accordance to Western guidelines. Students registered at colleges affiliated with the University (King's and Huron) are eligible for this benefit.

1. The dependent children must initially satisfy the entrance requirements of their chosen degree program, and thereafter meet the academic standards as defined in Sections 2 and 3 below.
2. The required minimum academic achievement for receiving the scholarship under this Plan shall be **an average of 70% in the courses taken in the previous academic year and full-time registration in the current year.** Courses taken during the summer session (May–August) may be included in the average calculation if your average from the September to April period is below the required minimum. For programs where grades are not assigned, the Dean of the Faculty (or a designate) shall be asked to provide an assessment. To qualify, this assessment must be equivalent to at least a 70% average. Verification by the Dean must be in writing.
3. It is the responsibility of the scholarship applicant to provide evidence of eligibility to Student Financial Services along with their application. **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**
4. The scholarship shall be tenable for courses taken for credit towards a degree from Western University for a maximum of four years full-time (not necessarily consecutive). "Full-time" as defined in accordance with Western's guidelines.
5. The dependent will not be eligible to retain the scholarship for the current year with reduced course load or withdrawal. No payments will be issued if the dependent reduces or ends their full-time studies prior to benefit payment. It is the responsibility of the dependent to notify the Student Financial Services in writing about the changes to enrolment resulting in a reduced course load or withdrawal after the scholarship approval.
6. Application for an award under this Plan may be made at any time up to June 30, 2027 following the start of the academic session for which application for an award is being made.

*A **dependent child** is defined as unmarried (including legally adopted children, foster or step-children), not engaged in full-time employment, dependent on you for financial support and under the age of 21 unless the child is registered as a full-time student in which case the child must be under the age of 25 or if incapable of self support due to mental or physical infirmity which began while the child was covered as the Employee's dependent will continue to be eligible.

The value of the annual benefit shall be **\$3,000 for the period of September 1, 2026 to April 30, 2027.** 'Academic year' refers to the September to April period only, and does not include summer or intersession courses.

The personal information on this form is collected under the authority of the University of Western Ontario Act, 1982, as amended. To view the complete Personal Information Collection Notice, visit the online Academic Calendar at: <http://www.westerncalendar.uwo.ca/>

How to apply?

Please upload your completed form as a PDF via secured online DocDrop (<https://studentservices.uwo.ca/secure/oneexperience/docdrop>) Select 'Employee Group Scholarships' (Dependent Tuition Scholarship) when uploading your application.

How will the dependent be notified of the decision?

Dependent will be notified of the of the scholarship application decision in writing, via their Western email. Details regarding eligibility are the personal information of the student and cannot be disclosed to a third party without the consent of the student.

How funds will be issued?

Main campus students: Approved scholarship funds will be applied to the student's fee account. If fees have been paid in full, a refund will be issued to the student by direct deposit.

Affiliate College students: Approved scholarship funds will be transferred to your affiliate college account.

Deadline: June 30, 2027. This application deadline is strictly enforced.

2026-27 PMA Dependents' Tuition Scholarship Plan

Section A – Student Enrolment (please check one):

☐ Undergraduate (Full Time) - \$3,000	☐ Graduate (Full Time) - \$3,000
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Section B – Student Academic Status (Please check off the appropriate section under which you qualify)

	I have completed high school within the last two years, with a minimum 70% average in my top six grade 12 U/M courses.
	I have completed at least one year of university/college studies, with a minimum 70% average in the previous academic year. <u>If previous years studies were not completed at Western, official postsecondary transcript must be attached.</u>
	I am a mature or part-time student who received a minimum 70% average in my last year of formal education. <u>If previous studies were not completed at Western, official secondary or post-secondary transcript must be attached.</u>
	I placed in the top 50% of my class in the previous academic year in a program for which grades are not given. <u>Proof of academic standing must be attached.</u>

Section C – Student Information

Student Number (required):	Date of Birth: mm/dd/yyyy
Surname:	Given Name:
Address:	
Phone #:	Email:

I hereby certify that all information provided on this application is true in all material respects.

Signature of Student Applicant

Date

Section D – PMA Member Certification

Surname:	Given Name:
Employee # (required):	Phone #:
Faculty/Department:	Email:

I hereby certify that I am a current, regular full-time PMA employee at Western University. The foregoing statements relating to the student named in Section 'B' are true in all material respects. The aforementioned student is my dependent, as defined by the Benefit plan for PMA staff

Signature of PMA Member

Date