

## **THE BILL LAMB MEMORIAL BURSARY**

### **GENERAL INFORMATION**

Bill Lamb was born, raised and educated in Windsor, Ontario. During his twenty-three years of employment with The Windsor Board of Education he served as classroom teacher, Assistant Coordinator of Programs for the Gifted and Developmentally Challenged, Program Leader for the Community Living Program at Walkerville and Special Education Services Consultant.

Bill will always be remembered for his work in representing the needs of the developmentally challenged at both local and provincial levels. He firmly believed that the goals in education for the developmentally challenged are no different than for any other student - to assist the individual to achieve to the maximum of his/her ability. His focus was on equal opportunity and access into the community of all developmentally challenged individuals. Work Experience, Job Coaching and School to Work Transition were and continue to be synonymous with the name Bill Lamb.

After a lengthy battle with cancer, Bill passed from our midst on December 6, 1991. He fought the battle with courage and dignity, the way he faced all challenges.

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### TERMS AND CONDITIONS OF ELIGIBILITY AND SELECTION

Established in memory of  
Bill Lamb  
who dedicated his teaching career  
to the Developmentally Challenged

1. Bursaries to be known as The Bill Lamb Memorial Bursary up to the value of \$500.00 shall be offered annually (until the monies are depleted) to students of the Greater Essex County District School Board who qualify for entrance to a **Community College in the Developmental Support Worker Program** and meet the requirements set forth below.
  - a) **Academic Requirements:** Each applicant must be an above average student.
  - b) **Character and Interests:** Each applicant must be of good character and must have made worthwhile contributions to school and community activities.
  - c) **Residence:** The student must have attended a secondary school under the jurisdiction of the Greater Essex County District School Board for the final two years and must be a resident of Canada.
2. **Selection:** The selection of the students to whom the bursaries are to be granted shall be made by the Committee and shall be made only if, in the opinion of the Committee, suitable candidates make application.
3. **Power of the Committee:** The decisions of the Committee in the awarding of bursaries and all decisions related to the bursary fund and the administration thereof shall be final.
4. A student will forfeit the monetary benefits of his/her award if he/she withdraws from the Community College before completion of the diploma requirements and all monetary benefits advanced to the student shall be repayable to the bursary trust upon such terms and conditions as the committee, in its discretion, may decide.

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**APPLICATION FORM**

Name: \_\_\_\_\_  
(Surname) (Given Names)

Home Address: \_\_\_\_\_

What school did you attend this year? \_\_\_\_\_

What other secondary schools did you attend? (give dates)  
\_\_\_\_\_  
\_\_\_\_\_

Date of birth: \_\_\_\_\_

Which Community College do you wish to attend? \_\_\_\_\_

What course do you plan to take? \_\_\_\_\_

What kind of work would you like to do after graduation? \_\_\_\_\_

Why did you select this Community College and this course? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What were your favorite subjects in high school? \_\_\_\_\_  
\_\_\_\_\_

In what activities, other than studies, would you like to participate in at community college?  
\_\_\_\_\_

Special Awards Received and Community Involvement  
\_\_\_\_\_  
\_\_\_\_\_

Any other comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Additional comments and recommendations on attached sheets are welcome.)

*Attach an official transcript of your marks.*

**Declaration**

We, the undersigned, hereby declare that to the best of our knowledge, the information given in this application is true in all respects.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Principal \_\_\_\_\_ Date \_\_\_\_\_

**Principal to forward the application on or before the last Friday in April to:**

**The Bill Lamb Memorial Bursary  
c/o Greater Essex County District School Board  
451 Park Street West  
Windsor, Ontario  
N9A 6K1**

Attention: Superintendent of Education/Special Education Services