

FINANCIAL ASSISTANCE APPLICATION
POST-SECONDARY STUDENT ASSISTANCE PROGRAM

Name _____ Date of Birth: _____ Sex: M _____ F _____
Address & Postal Code: _____ S.I.N.: _____

e-mail: _____
Telephone: _____

I Hereby certify that I have lived
In Canada for the past _____ years.

Band Number: (attach status card) - (A)

Highest grade attained: _____ (attach Dogwood or School Transcript) - (B)
____ Single _____ Single Parent (attach birth certificates for dependents) - (C)
____ Dependents
Married or C/L: _____ with employed spouse _____ unemployed spouse

PROGRAM & INSTITUTE:
Institute Name & Address:

Institute Code: (office use only)

Institute Telephone Number:

Institute Fax Number:

Institute Type: (check one)

____ College _____ University _____ Private Institution _____ Other

Program Course and Name:

Area of Study: _____ Are you studying: _____ Full Time _____ Part Time

QUALIFICATION SOUGHT: (attach letter of acceptance) - (D)

____ College _____ Bachelor _____ Prerequisites _____ Diploma _____ Certificate
____ Masters _____ University (Undergraduate) _____ University (Post Graduate)

Program Course and Length:

Sponsorship required for what period:

____ Fall _____ Winter _____ Spring _____ Summer (Sept / to April / .)

POST SECONDARY STUDIES RECORD (Attach copy of transcript) - (E)

Field: _____ Year: _____ Institution: _____

I hereby apply for financial assistance under the Post Secondary Assistance Program for the period indicated. The above information is accurate to the best of my knowledge, providing false information will automatically affect your application. I agree to sign Student Contract.

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date received: _____ Level of Program Studies: 1 --- 11 --- 111 (circle)

New Student: _____ On-going Student: _____ Code: _____

Type of Assistance: Full Support _____ or Tuition only: _____

Date _____ funding: Approved Rejected Put on wait list (circle)

Date Letter written to applicant: _____

Date: _____

KITSUMKALUM POST SECONDARY ASSISTANCE PROGRAM — STUDENT CONTRACT

STUDENT RESPONSIBILITIES:

1. Letter to Band requesting Post Secondary Assistance, stating your education goals.
2. Attach the completed Financial Assistance Application, ensure all required attachments are attached. (A-D)
3. Students are responsible for all expenses leading to acceptance.
4. Students must maintain a C+ or the required level by the institute for funding to continue.
5. *At the end of the FIRST and SECOND semester it is the student's responsibility to ensure that the Band receives copy of your official transcript within a week of issuance. Failure to comply will cause a disruption in funding.*
6. *Student must report any changes to their education plan DURING the school term.*
7. Damage deposit for accommodation is the student's responsibility.
8. Students must make every effort to attend institution closest to home.
9. Receipts for books, supplies, travel must be turned into Band.
10. Students that are enrolled in a program that extend over more than one year must re-apply each year. All receipts plus transcript from previous year must be turned in before future funding is approved.
11. Students must adhere to #4, #5, #6, #9 or funding shall be in jeopardy.

STUDENT CONTRACT:

I, the undersigned, do hereby acknowledge reading the student responsibilities and understand them and hereby agree to abide by them.

Signing this contract authorizes the EDUCATION ADMINISTRATOR to request educational records, and transcripts from the educational institution.

(Student Signature:

Date: _____

(Witness Signature)

BAND'S RESPONSIBILITIES:

1. TO SPONSOR AS MANY STUDENTS AS FUNDING PERMITS.
2. USE THE POST SECONDARY POLICY TO APPROVE SPONSORSHIP.
3. DEPOSIT LIVING ALLOWANCE: 3 BANKING DAYS PRIOR TO END OF MONTH.
4. CONNECT WITH INSTITUTION'S FIRST NATION ADVISOR - WITH HELP OF STUDENT.
5. KEEP UP TO DATE ON SCHOLARSHIPS, BURSARIES.
6. KEEP STUDENT'S FILE UP TO DATE.

YOUR CHECK OFF LIST FOR POST SECONDARY ASSISTANCE:

1. LETTER FROM APPLICANT EXPRESSING THEIR EDUCATIONAL PLAN.
2. FINANCIAL ASSISTANCE APPLICATION SUBMITTED BY MAY 30 WITH THE FOLLOWING ATTACHMENTS:
 - STATUS CARD
 - DOGWOOD CERTIFICATE/OR COPY OF LAST SCHOOL TRANSCRIPT
 - BIRTH CERTIFICATES FOR DEPENDENTS
 - LETTER OF ACCEPTANCE FROM INSTITUTION
 - COPY OF TRANSCRIPT RE PREVIOUS POST SECONDARY
 - BY OR AROUND JUNE 30 APPLICANT WILL BE ADVISED BY EDUCATION ADMINISTRATOR THE STATUS OF THEIR APPLICATION

NOTES:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.