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POST-SECONDARY STUDENT SUPPORT APPLICATION

APPLICANT INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

EMAIL: _____

PHONE #: _____ CELL PHONE: _____

DATE OF BIRTH: _____ NAMGIS STATUS #: _____

SCHOOL AND PROGRAM INFORMATION

SCHOOL: _____

PROGRAM _____

TYPE OF PROGRAM: ABE/UCEP/Upgrading Certificate Diploma Bachelor Masters Doctorate
 Other Individual course

You have been accepted to this school and program? Yes No

A copy of acceptance letter has been included with this application? Yes No

FAMILY INFORMATION

MARITAL STATUS:

Single person
 Single parent
 Married

During the applicant's study period, will your spouse be:

Living with the applicant during the study period? Yes No

At home caring for dependents on a full-time basis? Yes No

Be a full-time post-secondary student? Yes No

Employed part-time? Yes No

Employed full-time? Yes No

Common-law

If in a common-law arrangement, prior to the date of application, did you live with your common-law spouse for at least one continuous year? Yes (if yes, please answer questions above under "Married") No

DEPENDENT INFORMATION

Please provide the following information for all dependents under the age of 18 living with the applicant full-time.

- 1) NAME: _____ Relationship _____
Date of birth: _____ Attending school full-time? Yes No
- 2) NAME: _____ Relationship _____
Date of birth: _____ Attending school full-time? Yes No
- 3) NAME: _____ Relationship _____
Date of birth: _____ Attending school full-time? Yes No

PRIOR SPONSORSHIP INFORMATION

Have you been previously sponsored by Namgis First Nation? Yes No

What program were you sponsored for? _____

Years sponsored: _____

If you have received prior sponsorship, did you complete your program? Yes No

If you did not complete your sponsored program, please explain why.

EDUCATION HISTORY

Do you have a Dogwood Diploma/Adult Dogwood Diploma Yes No

If you do not have any of the above, what was your highest grade completed? _____

Have you already completed a portion of the program that you are applying for? Yes No

If so, what portion? _____

Please list any completed certificates, diplomas or undergraduate degrees already acquired:

By signing below, I agree to inform the Namgis Post Secondary office of any changes to my program, school, address, phone number or email.

STUDENT SIGNATURE

COURSE PLAN

of required courses for program completion: _____

Please indicate what courses you will be taking for first year

Please be advised that you will be able to take summer courses ONLY IF it is required as part of the program

	<u>SEPT-DEC</u>	<u>JAN-APR</u>	<u>MAY-JUN</u>	<u>JUL-AUG</u>
Year 1	1) _____	_____	_____	_____
	2) _____	_____	_____	_____
	3) _____	_____	_____	_____
	4) _____	_____	_____	_____
	5) _____	_____	_____	_____

DECLARATION

I UNDERSTAND THAT:

- 1) It is against the law to make false or misleading statements on this application or any of the documents required for PSSSP assistance.
- 2) All information is subject to verification
- 3) It is my responsibility to ensure all information on this application and any of the documents required for PSSSP assistance is accurate
- 4) Applications may be discussed with Namgis Education Coordinator, Chief and Council, Finance Department, Social Assistance Department and/or related staff.

I UNDERSTAND THAT BY SIGNING BELOW IT MEANS:

I have read the Namgis PSSSP policy

I have answered all the required questions on the application and related document

STUDENT SIGNATURE

DATE

RESIDENCY CONFIRMATION

Only complete this section if you have been a resident outside of Canada)

I, _____ certify that I have been a resident of Canada for more than 12 consecutive months
PRINT NAME