

shíshálh Nation Education, Training & Post-Secondary (ETAPS) Department



shíshálh Nation

Application for Funding: Post-Secondary Student Support Program

Funding Checklist

The following documentation is required to process a funding application:

- Copy of Status Card and Birth Certificate
- Complete Application Package
 - Signed Application Form and Budget Breakdown sheet
 - Signed Authorization to Obtain Information Form
 - Program outline
 - Program academic planner (list of courses required for certification, course taken/remaining)
 - Phone/fax/email for both Admissions Office and bookstore
 - Official transcripts in a sealed envelope (high school students can submit unofficial transcripts until final graduation transcripts are available)
 - Acceptance letter from post-secondary institution and program (high school students can submit conditional letters of acceptance until final acceptance letter received)
- If applicable: copy of dependent's birth certificate, status card, child tax benefit papers
- If applicable: Affordable Child Care Benefit (ACCB) eligibility form and daycare documentation

Post-Secondary Funding Deadline Submissions

For new students:
March 1 st – May start
May 1 st – September start
September 1 st – January start

INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED. IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE APPLICATION AND SUPPORTING DOCUMENTS ARE ALL SUBMITTED BY THE DEADLINE.

NOTE: Please make your appointment with an ETAPS Coordinator well before the start date of your job/training program as the application may take 4-6 weeks to complete from initial interview to approval. Once all required and supporting documentation is received, then it will take up to 5 days for review and approval or denial. If you have any questions about this checklist, please contact your ETAPS Coordinator.

Completed applications should be submitted to ETAPS Coordinators Donna Tack at dtack@shishalh.com

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Application Form

PERSONAL IDENTIFICATION				
Full name:			Birthdate (dd/mm/yyyy):	
Mailing Address:		City:	Prov:	Postal Code:
Phone:	Cell:	Email:		
Personal Education Number:			Status Number:	
# of dependents living with you:				<input type="checkbox"/> n/a
Dependent name	Birthdate (dd/mm/yyyy)		Childcare needed?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Program Information			
Name of training / course / program:			
Program start date (dd/mm/yyyy):	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time	
Program end date (dd/mm/yyyy):	<input type="checkbox"/> In-person	<input type="checkbox"/> Online/distance	<input type="checkbox"/> Combination
Program duration:	Location:		
Name of post-secondary institute/training organization:			
Address:			
Contact name:	Position:		
Phone:	Email:		

All information provided to us will be considered as supplied in confidence. Under certain circumstances some information may be released subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection and use of this information, contact shísháhl Nation ETAPS department at 604-885-9404, PO Box 740, Sechelt, BC V0N 3A0.

- I declare that the foregoing information provided to the shísháhl Nation ETAPS department is, to my knowledge, true and complete and that it is subject to verification by shísháhl Nation and its representatives.
- I authorize the shísháhl Nation ETAPS Department to release application information with involved organizations, training institutions, and government agencies.
- I agree to immediately report any changes of residence, telephone, or other contact information to the shísháhl Nation ETAPS department

_____ /dd /mm /yyyy
Student Signature **Date**

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Budget Breakdown

ITEM	Details	Cost per term (4 months)	Cost per year (x amount by 2)
Tuition, books and supplies			
Application fee	one time only		
Registration fee			
Total Tuition fees	include breakdown below		
Course #1			
Course #2			
Course #3			
Course #4			
Course #5			
Mandatory school fees	e.g. student union fees		
Books	max \$700/term		
Supplies	max \$100/term		
Other:			
Other:			
Total tuition, books and supplies		0	0
Other expenses			
Travel: MAX \$1,000.00 per term			
Living allowance Calculate rate times term months that you will be attending school. Example: base rate of \$1,600.00 for a single person X 10 month = \$16,000.00	RATES:	Single:	
	\$1,600.00	One dependant:	
	\$1,900.00	Two Dependants:	
	\$2,200.00	Three dependants:	
	\$2,500.00 (MAX)		
Childcare	max \$300/month per child		
Total other expenses		0	0
Total funding requested		0	0

* Original receipts must be submitted at the end of each term

**The ETAPS Department adheres to travel rates set by shíshálh Nation Chief and Council. These amounts are subject to change.

Please contact your ETAPS Coordinator with questions about eligible costs

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Authorization to Obtain Information (Post-Secondary Students)



shíshálh Nation

The following individual is/or was a sponsored student of the shíshálh Nation. Name of Student:

- I authorize the shíshálh Nation ETAPS Department to obtain any information required to determine my eligibility for education or training financial assistance.
- I authorize the organization/institute in which I am attending to release transcripts/certificates, attendance records, invoices, and progress reports to the shíshálh Nation ETAPS Department.

Student's Authorization Signature

Date

(Please note that completion of this form does not guarantee approval of funding)

Institute/School

Student Number from school

ETAPS Coordinator (Print Name)

ETAPS Coordinator Signature

Date