

POST SECONDARY APPLICATION FORM

For office use only- Date Application Received: _____

- 1) Continuing student 2) High School Graduate
3) New student 4) Returning student

Student Personal Information

Last Name:

Given Name/s:

Band Name:

Registry No:

Social Insurance Number:

Permanent Address:

Street Number

Street Name

City

Province

Postal Code

Marital Status: Single Married Common Law

Number of Years Living in Canada:

Birthdate yy/mm/dd:

Years

Email Address:

Telephone Number/s:

(____) _____

(____) _____

Do you require child care at the SLELEMW Child Development Centre, located in the
Saanich Adult Education Centre? Yes No

Educational History

Most Recent Post Secondary or Secondary School Attended: _____ Last Year Enrolled: _____

Program Information:

Program Applying to: _____ College/University: _____

College Prep Certificate Diploma Degree Graduate Studies

Length of Program: _____ Full-Time Part-Time

_____ Months and/or Years

Start Date: _____ End Date: _____

Continuing Students only:

Current year of studies (i.e. 2nd year):

_____ Year

Dependants:

*Children/Dependants under the age of 19 living with applicant
Valid proof must be provided- (i.e. National Child Benefit Statement or Tax Refund
Statement from previous year).*

LAST NAME	GIVEN NAME	BIRTHDATE	RELATIONSHIP

For office use only:

Living Allowance Status/Amount: _____

I, _____, hereby declare that I understand what is expected of me in order to receive Post Secondary assistance from the WSÁNEĆ School Board in the upcoming academic year.

I understand that it is my responsibility to:

- Provide 'OFFICIAL' transcripts after **every** semester that I am funded for (regardless if full-time or part-time). Official transcripts for the Fall semester (Sept.- Dec.) must be in by Jan. 18th, and official transcripts for the Winter semester (Jan.- April) must be in by May 15th.
- Maintain a full-time status while being funded as a full time student.
- Notify the Post Secondary Advisor, if there are any changes relating to my Post Secondary funding (ie. program change, course dropped, phone number, marital status, etc.)
- Apply for Post Secondary funding by February 28th if I intend to continue my studies the following year.
- Notify the Post Secondary Advisor if I am graduating at the end of the academic year, and would like to be invited to the Post Secondary Grad in June.

Failure to adhere to these requirements may result in the loss of WSB funding for the immediate school year, with the possibility of impacting funding for following years.

I ACCEPT RESPONSIBILITY FOR SATISFYING THE ACADEMIC REQUIREMENTS OF THE WSÁNEĆ SCHOOL BOARD, THE INSTITUTION I AM APPLYING TO, AND MANAGING THE EDUCATION ASSISTANCE FUNDS TO THE BEST OF MY ABILITY. ALL THE INFORMATION PROVIDED WITH MY APPLICATION IS ACCURATE.

<u>Signature of Applicant</u>	<u>Date</u>
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ACADEMIC RECORDS RELEASE FORM

Post Secondary funding is conditional upon the applicant signing a release form which permits the WSÁNEĆ School Board, Post Secondary Advisor to obtain a sponsored student's registration documents, tuition invoices, academic transcripts, faculty progress reports, and attendance reports.

I have received the WSB POST SECONDARY HANDBOOK and am satisfied I understand the policy and requirements expected from me as a student.

INITIAL: _____

DECLARATION:

I hereby authorize the WSÁNEĆ School Board, Post Secondary Advisor to request and obtain my registration documents, tuition invoices, academic transcripts, faculty progress reports, and attendance reports. Also, to correspond with Social Development Offices and other financial agencies.

I have met the Proof of Residency Requirement and have been a resident of Canada for the minimum of 12 months or more.

Student Name: _____

Student Signature: _____

Date: _____

LETTER OF INTENT

Mailing Address

Date: _____ 20__

Information: Who you are?

Program: How long is the program? Commitment to the program:

Educational Plans and Goals:

Signature: _____