

Name of Applicant:	
Year Applied for:	
Date Submitted:	(Office use)

Post-Secondary Application for Funding

Attention: USIB – NEW or Returning POST SECONDARY STUDENTS APPLICATION DEADLINE APRIL 30th of each year

<u>P</u>

· · · · · · · · · · · · · · · · · · ·
January and Summer students are funded based on the waitlist from September
Please read the enclosed USIB Post-Secondary <u>Education Development Policy for Funding</u> before fillin out your Application Form.
fyou have any questions regarding the Policy, please contact the USIB Education Coordinator.
Please submit the following documentation with your application:
1. Complete an Application Form for Post-Secondary Funding: (keep for your reference).
 A. Signed Application for Post-Secondary Funding (& for continuing studies) B. Applicants Budget, Expenses Section & Study Plan C. 3rd Party Sponsorship Form from your institution D. Documentation Proof as a Registered Indian of Upper Similkameen Indian Band E. Direct Deposit information (i.e. Void Cheque) F. Signed Upper Similkameen Indian Band's Post-Secondary Student Funding Contract
2. Additional documents to be attached:
 Letter of intent (include an outline of the program you are applying for). Letter of acceptance into your current Program of Study. Letter from counsellor stating you have met all criteria for the program. Copy of Registration, Course Syllabus Required textbooks for your courses – with costs Most recent Official Transcripts (sealed and sent to the Education Coordinator, see address below) Signed Waiver/Release information form from your learning institution Proof of additional applications of other funding sources.
Please submit the completed application to the USIB Education Coordinator before the cut off deadline. A
ersonal interview will be necessary. A new application for funding must be filled out every year. Should you
equire further clarification contact the Education Coordinator, thank you for your interest in furthering your
ducation. Please retain copies for your records.
hank you
Cecelia Louis-Ralston – USIB Education Coordinator

TI



A. Application for Post-Secondary Funding (& for continuing studies)

Applicants Information:

Applicants illionnation				
First Name:		Last Name:		
Current Mailing Address:				
City:		Postal Code:		
Telephone #		Email Address:		
S.I.N.		Band Status Number:		
Marital Status (Please Check)		Date of Birth (month/day/yea	nr):	
Single:	Married:	Common Law:	Name of Spouse:	
Spouse's/Common Law Partn	er Information			
Last Name	Given Nar	ne		
S.I.N Employer				
Receiving other benefits? Yes / No State Benefits (WCB, Pension, etc.)				
Number of Dependents (under the age of 19 – Living with you) Provide proof of Residence.				
Last Name	First Name	Date of Birth	Relationship	

Applicants Financial Information:

INCOME: Are you presently:				
Full-Time Employed:	Part-Time Employed:	On Social Assistance:	Receiving Employment Insurance:	
If employed, do you plan to continue employment? Yes / No				
Your Approximate Annual Income (excluding your Bursary)				
Under \$15,000	\$15,000 - \$25,000	\$25,000 - \$40,000	Over \$40,000	
Your Spouses Approximate Annual Income (not including Bursaries)				
Under \$15,000	\$15,000 - \$25,000	\$25,000 - \$40,000	Over \$40,000	
Summer employment: \$		Part-Time while at school: \$		



Applicants Previous Education & Training:

Institute & Location:	Program:		rogram Co Y or N)	ompleted	Year Co	ompleted:		ificate or Diploma eived:
Reason for Not Comple	eting							
Please attach another po								
USIB Education Training								
Name of Program or C	ourse:							
Name of Institution & A	Address:			Name of A	dvisor			
Phone Number				Email Addr	ess			
Student #:		Studying:	: Full time	□ Part-time		Semester: F	all □	Winter □
Program/ Course Name	9	Major/M	inor			Length of P	rograr	n
Start Date:				Completion	n Date:			
Study Plan (Complete	Using Your Scho	ol Calenda	r					
	Fall Session		Winter Se	ession	Sprin	g Session		Summer Session
Duration								
Number of Courses								

Number of Credits

Full Time/Part Time



Projected Completion Plan		
	Number of Courses:	
Upgrading (1 Year)	Number of Courses:	
Year 1	Number of Courses:	Total Credits Year 1:
Year 2	Number of Courses:	Total Credit Year 2:
Year 3	Number of Courses:	Total Credits Year 3
Year 4	Number of Courses:	Total Credits Year 4
Year 5	Number of Courses:	Total Credits Year5
Total Number of Credits Required for C	ompletion:	
I have consulted with an academic advi	sor/career councillor: Yes No	
If yes, please answer the following:		
Name of Advisor:	Phone #	Email:
Date of Meeting:		
I have contacted the Indigenous Suppo	rt Worker at my Institution: Yes No	П
If yes, please answer the following:		
Name of Advisor:	Phone #:	Email:
Date of Meeting(s):		
Code of Conduct and Signature:		
		danatan dan da assaut that the UCID
	rrect to the best of my knowledge. I un uss my application in order to assist wit	
Signature of Student)	(1	Date)
Signature of Parent/Guardian if studen	t is not 19 years of age	Date)



FOR EDUCATION COMMITTEE USE ONLY:

Committee Members – Names & Signa	ture	Date Application Reviewed.
1.		
2.		
3.		
B. Budget Worksheet for	Living Expenses, while	attending Post-Secondary:
Please Note: The Fiscal Year runs from Aneed to be applied for in the next Fiscal		ns run into Spring/Summer, those expenses
Living Expenses	Costs	
Pout Pour / Pour I Pour		
Rent, Room/Board, Dorm		
Groceries		
Utilities		
Telephone/Cell Phone		
Transportation (Parking or Bus Pass)		
Clothing/Personal Care		
Entertainment / Miscellaneous		
Daycare Fees (After Subsidy)		
Education Expenses		
Education Expenses	Costs	Amount to be funded by other Organizations (Ex. OTDC,
Registration Fees		Scholarships, Bursaries)
Tuition		
Books		
Mandatory Supplies		
Tutoring		
Travel (If living away from home)		
Other Expenses (List Below)		



Total Expenses		
I have additional applications for fundi	ng. They are: (Please list)	
Scholarships:		
Bursaries: □		
Awards:		
Provincial/Federal Student Loans:		
I have spoken with the Financial Aid Department at my Institution about Funding: Yes No		
USIB FUNDING IS ONLY TO SUPPLEMENT APPLY FOR BURARIES & SCHOLARSHIPS	IT THE COST OF POST-SECONDARY EDUC	CATION. WE REQUIRE STUDENTS TO

C. 3rd Party Sponsorship Form from your institution

- D. Documentation Proof as a Registered Indian of Upper Similkameen Indian Band
 - Please provide a copy of your status card.
- E. E. Direct Deposit information (i.e. Void Cheque) or EFT form from your Bank.



F. Upper Similkameen Indian Band's Post-Secondary Student Funding Contract

Part I:

This contract is between the Upp	er Similkameen Indian Band and the undersigned student for the purpose of acquiring
education sponsorship from the l	Jpper Similkameen Indian Band in order to pursue a Post-Secondary program of study.
Upon accepting sponsorship, I agr	ee to the following Terms and Conditions in order to make the best use of my funding:
I, (Print)	, have read the Upper Similkameen Indian Band's Post-Secondary
Education Policy. I understand its	content and intent and therefore I agree that:

- 1. I have read the Upper Similkameen Indian Band Post-Secondary Policy and submitted the application. I understand that any incomplete documents will be returned for clarification.
- 2. I understand that my application will be reviewed and that the criteria within the Policy will be taken into consideration.
- 3. I will register in a recognized, fully accredited Institution (as per –Department of Indigenous Services Canada (formerly Indian Affairs etc.) PSE- policy guidelines).
- 4. I will enroll in a full course load, which is a minimum of 4 courses or equal to a minimum of 12 credits per semester or what my institute considers full-time studies.
- 5. Once my application has been approved, the Band will notify the Post-Secondary Institution by sending a letter of Support for Sponsorship or a third-party sponsorship form to be filled out and sent by the Education Coordinator.
- 6. Tuition will be paid directly to the educational institution by the Band. Books and living allowances for full-time students will be paid directly to the student. Living allowances are paid as direct deposit to the student's bank account the last week of every month for the next month's allowance.
- 7. Should I not complete the course or program of studies, that I have entered into, for reasons other than a medical release or other emergency reasons, I will pay back any monies that the Upper Similkameen Indian Band has paid towards my education from the dates mentioned in this agreement. Unexplained absences over (3) day will result in automatic termination of education assistance.
- 8. I will maintain a minimum 3.0 GPA Average.
- 9. Should I withdraw or be terminated by the institution, I will pay the Upper Similkameen Indian Band the money owed to them within one calendar year from the date of withdrawal or termination of studies.
- 10. Until all official transcripts of sponsored courses have been provided to the Education Coordinator and all outstanding debts are paid to the Upper Similkameen Indian Band, I understand that I will not be eligible for further funding.
- 11. To notify the Upper Similkameen Education Coordinator immediately of any: changes of address, enrolment addition/withdrawal of classes, probation, suspension, etc. (please provide reason for changes).
- 12. I will attend class regularly and report any absences over three (3) days per month.
- 13. I authorize the USIB Education Coordinator full access to my grades, progress reports, attendance records, and any other information that may be pertinent to my Post-Secondary education.
- 14. I will keep the USIB Education Coordinator informed as to any fees, registration amounts, and deadlines for payment of fees.

Part II

Once I have received my allocation of Living Allowance and Book Allowance, I will be responsible for my actions and will be expected by the Upper Similkameen Indian Band to spend this money accordingly. I understand it is the Policy of the Upper Similkameen Indian Band NOT to advance funds for books, supplies or living allowance.

Part III

I have read and understand the policies and procedures for Educational Funding of the Upper Similkameen Indian Band and agree to all the above-named conditions.

Signature of Applicant	Parent/Guardian Signature if under (19)	Signature of USIB Education Coordinator
Dat	e Signed <u>:</u>	
Upper Similkameen Indian I	Band: Post-Secondary Education	Page 7 of 7