# Fishing Lake First Nation Post Secondary Program APPLICATION FORM

Privacy Act Statement

All personal information provided shall be protected under the provisions of the Privacy Act.

A. Student Information First Name: Last Name: Address: Cell: \_\_\_\_\_ Phone: Next of Kin: Phone: Date of Birth YY MM DD **Treaty Number: Email Address:** B. Assistance Required Post-Secondary Institute to be Attended Location Full-time Part-time Program of Study (Major/Minor- If Applicable) Attendance YY MM DD YY MM DD Start Date Anticipated Completion Date **Length of Program** Semester for which support is being applied for: Fall (Sept-Dec) **Fall and Winter** 

Winter (Jan-Apr) Other

### C. Documentation in Support of Application

In support of the application for sponsorship, each applicant (student) shall supply to the Fishing Lake First Nation Post Secondary Program, no later than fifteen (15) calendar days prior to the commencement of their program of study, the following documentation:

In the case of students entering a post-secondary institution for the first time or entering a program of study for which a pre-requisite program of study is required:

- 1. An official transcript of the student's high school marks or in the case of the student entering a program of study for which a pre-requisite is a condition, an official transcript from the post secondary program of study, if any, needed as an entrance requirement for the new program of study;
- 2. A copy of the student's Treaty card/certificate of Indian Status card;
- 3. A sworn declaration as completed by the student as to the domestic status of the student, in such form as prescribed by the Committee, so as to enable determination of the applicable living allowance rates for the student, if any;
- 4. A signed waiver of access to information form completed by the student, in such form as prescribed by the Committee, allowing for access to information on the student from the post secondary institution providing the program of study;
- 5. Proof of enrolment or registration of the student in their program of study at the post secondary institution; and
- 6. Letter of Intent, identifying skills, interests and career goals through a written submission.

In the case of students applying for on-going program sponsorship:

- 1. An official transcript of the student's marks received in their program of study since the last official transcripts of marks were provided;
- 2. If deemed necessary by the Fishing Lake First Nation Post Secondary office, a signed waiver of access to information form as completed by the student, in such form as prescribed by the Board, allowing for access to information on the student form the post secondary institution providing the program of study and from all government agencies.

- II. Students applying for ongoing sponsorship to complete their program of study, shall be required to provide to the **Fishing Lake First Nation Post Secondary Program** office their transcripts of marks prior to the following dates:
  - a) January 15<sup>th</sup> of each academic year for the previous fall semester;
  - b) May 15<sup>th</sup> of each academic year for the previous winter semester; and
  - c) September 15<sup>th</sup> of each academic year for the previous spring/summer semester. It shall be the responsibility of each student to provide his or her transcripts of marks to the Fishing Lake First Nation Post Secondary Program office within the time frame specified.

#### **D. STUDENT COVENANTS**

In consideration of my application for sponsorship under the **Fishing Lake First Nation Post Secondary Program**, I the undersigned applicant hereby covenant and agree that:

- 1. I have received a copy of the **Fishing Lake First Nation Post Secondary Program** Student Policy Manual and agree to abide by the terms and conditions as stated therein;
- 2. In accordance with the provisions of the Fishing Lake First Nation Post Secondary Program Student Policy Manual, I undertake and agree to submit to the Fishing Lake First Nation Post Secondary Program office all required supporting documentation as outlined herein in respect of my application within the time frame specified and further undertake and agree to report to the Fishing Lake First Nation Post Secondary Program office any changes in my class structure and/or program of study, in accordance with the provisions of the Fishing Lake First Nation Post Secondary Program Student Policy Manual;
- I understand and agree that failure to provide such information or providing of false or misleading information in any of the aforementioned documentation may result in loss of sponsorship being provided to me under the Fishing Lake First Nation Post Secondary Program; and
- I represent, warrant and declare that all information provided in the within application along with any documentation provided in support of my application shall at all time be true and correct.

dent Name- Applicant (please print)	Student Signature- Applican
-------------------------------------	-----------------------------

Fishing Lake First Nation Post Secondary Program
Box 1209, Wadena, SK SOA 4J0
Tel: (306) 338-2240 Fax: (306) 338-2403

Date

## **E. WAIVER OF ACCESS TO INFORMATION**

I, the undersigned hereby authorize the administration office to obtain from the:	e Fishing Lake First Nation Post Secondary Program
Name of Post Secondary Institution Atter	nding
secondary institution including, withour information or documentation relating to institution from time to time and any transenrolled. In addition to the above, I also documentation through the Internet. These	t restricting the generality of the foregoing, any to any classes to which I am enrolled in at the said script of marks for any program of study to which I am authorize the access to the above information and/or se records shall be used for the sole purpose of verifying hing Lake First Nation Post Secondary Program and
Student Name	Student Number
Student Signature	Date

F. LI	/ING ALLOWANCE
Livir	g Allowance will be auto deposited into student bank account once a month.
Please	complete the following Auto Deposit Banking or include a Direct Deposit Form:
Name of	Bank:
Institutio Number	
Transit N	lumber:
Account	Number:

#### G. STUDENT RESPONSIBILITY

As a sponsored student of Fishing Lake Post Secondary Program, Lagree to:

- 1. Represent Fishing Lake First Nation in a positive holistic manner at all times.
- 2. I agree to follow protocol and be respectful to my sponsoring agency and to all who assist in administering the program. I acknowledge that my sponsorship may be discontinued if I do not follow protocol.
- Take an active interest in my studies and perform to the best of my abilities.
- 4. Attend classes regularly.
- 5. Successfully complete my program of study.
- 6. Submit a copy of registered class schedule to the FLPSP Coordinator within two weeks of receipt each semester.
- 7. Submit a copy of my transcript of marks to the FLPSP Coordinator by January 15, May 15, and September 15 from the institution I am attending each semester.
- 8. Provide my contact information: address, email and phone number to the FLPSP Coordinator within 10 days of my change of address, email or phone number.
- 9. Send an email to the FLPSP Coordinator one week before the end of each sponsored month to report on school progress.
- Carefully read and comply with all conditions contained in the Student Manual Policy.
- 11. Notify FLPSP Coordinator in writing of any program or course transfers or withdrawals or NP's or difficulties in class.
- 12. Request in writing to change program of study or institute transfer to the FLPSP Committee.
- 13. Applications must be submitted annually.
- 14. I ensure that only I will speak to the Coordinator and not have people call or conduct business on my behalf. I understand that what goes on in the FLPSP regarding my student information is confidential and the Coordinator cannot reveal or talk to third party persons (except those who serve as the FLPSP committee members) about anything regarding my financial situations or my academic history.

		C C
Student Signature	Date	