



Application for Education Funding Assistance - Post Secondary

Message from Executive Council

Congratulations on deciding to pursue your education goals!

Getting an education is the most important thing you can do to achieve the goals you have set for yourself. Achieving a university or college education, or acquiring a trade certification, opens up a huge number of opportunities. The evidence from study after study is clear: the surest way to a higher income and better quality of life and is to get post-secondary training.

Post-secondary education is not easy. It is one of the biggest challenges we can set for ourselves. It is intimidating to apply, it is a unique and different environment, and most of all, it is a lot of work. But it is one of life's most rewarding achievements – not just because of the personal challenge, but also because of the opportunities that await after you graduate.

Today's economy is oriented towards people who are highly trained in a trade or a profession. If you're ready, you will make a huge contribution to your own future, and to the future of our community, by taking the leap and registering for school.

We applaud you if you have made this decision. If you are still thinking about it, please read and consider this package carefully, and don't hesitate to call the Education department at (604) 943-2112. They'll help you out however possible. And good luck in your studies!

-Chief & Executive Council

Contact Information

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School Year (e.g. Sept 2020 - May 2021)

Type of Application

- New Application Renewal of Funding Change of Information
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Section A - Personal Information

First Name

Last Name

Address

Prov/State

Postal/Zip Code

Gender

 Male Female

E-mail Address

Phone

Marital Status

- Single Married
 Common-law Separated
 Divorced

TFN Enrolment
Number

Date of Birth

Section B - Previous Education Information

Secondary School

High School Name

Years attended

Grade 12 diploma?

Yes No

If not graduated, last grade completed

Have you completed a GED or Adult Graduation Diploma?

Yes No

Year completed:

Post-Secondary School

(attach additional sheet if necessary)

Institution type:

College University
 Trade program Other

Name of School

Diploma/degree/certification awarded and year completed

.....
Institution type:

College University
 Trade program Other

Name of School

Diploma/degree/certification awarded and year completed

.....
Please list any certificate programs or other training courses you have taken and the year:

Section C - Program Information

Please provide details about the program that you are seeking funding for.

Program/Course Name

School Name

Public Institution Private Institution

School Address

Registration Contact Name Telephone Email

Program type

Certificate

Vocational/Trades Program

I will be enrolled

Diploma

Undergraduate Degree

Full-time

Graduate Degree

Post-Baccalaureate

Part-time

Other

Anticipated Start and End Dates for the program

Have you been accepted into the program?

Yes No

For multi-year programs, please list the courses that you intend to take in the current year and the start and end dates for each course (you will need to email the Education department a copy of your course registration once your registration is confirmed for the year).

Course Name/Number Dates

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Course Name/Number Dates

Please describe the types of jobs you would be eligible for upon completion

Please describe other similar programs that you have researched (including costs) and your reasons for choosing this program. If there are comparable programs at schools other than the one you are applying to (for example, if you are applying to a private institution and there is a similar program available at a public institution, or if you are applying to school away from home and there is a similar program available in your local area), please provide details as to why you believe this program will be the best choice for your education.

Section D - Funding Request

Please check which funding amounts you are applying for from TFN:

Annual amounts:

- Tuition Fees
- Books and Supplies
- Travel Support*

Monthly Living Allowance** amounts:

- Single person (max. \$1,600)
- Married/Common-law - spouse working (max. \$1,450)
- Married/Common-law - dependent spouse (max. \$2,220)
- Single parent with one dependent (max. \$2,320)
- Supplement for multiple dependents (\$300 per dependent)
- Commuter allowance***
- Part-time student allowance (\$100)

* Full-time students who attend school away from their home community are eligible for travel support to assist with costs associated with travelling to and from school. TFN will reimburse actual travel costs, up to a maximum of \$1000 per year. Part-time students are not eligible for travel support.

**Full-time students who are employed up to 15.0 hours per week are eligible for the full monthly living allowance. Full-time students who work more than 15.0 hours per week are eligible for a living allowance according to the following formula: applicable living allowance (see above) minus 30% of gross monthly income. If they have more than one dependent, they are also eligible for the supplement for each dependent. Part-time students are not eligible for a full living allowance, however they are eligible for a top-up of \$100 per month.

*** As Translink fees are subject to change, TFN will cover the monthly rate as it stands as of that year.

Section E - Income

Full-time students who are employed **more than 15.0 hours per week** are eligible for a living allowance according to the formula set out in the Post-Secondary Education Policy.

Are you currently employed?

Yes No

Current Employer

Supervisor Name

Phone Number

Will you be working more than 15 hours per week while in school?

Yes No

Hours/week

Hourly rate

Section F - Dependants

What is your spouse's employment status?

- Employed Full Time Employed Part Time
 Unemployed - no assistance Unemployed - receiving assistance
 Other

If your spouse is receiving assistance (e.g. Income Assistance, E.I., Disability Benefits, WCB, Pension, etc.) please list what type of assistance and the monthly amount

If your spouse is employed, please provide their monthly income:

Please list your dependant children under 19 years of age who live with you, including name and date of birth. DO NOT include foster children or children who do not live with you.

Name

Date of Birth

Name

Date of Birth

Name

Date of Birth

Name

Date of Birth

Name

Date of Birth

Name

Date of Birth

Please provide name, date of birth, and details for any dependants that you have who are over the age of 19. This includes relatives who reside with you who are **unable** to work and/or to live independently, where you are their primary caregiver. You will need to provide details about what barriers they have and why you need to support them. Please indicate whether they are receiving assistance of any kind (e.g. disability benefits, pension benefits), the monthly amount they receive, and whether you are their legal guardian or committee. TFN may request documentation to support the information you provide here.

Section G - Code of Conduct and Declaration

Applicants are expected to abide by the following Code of Conduct in order to maintain their funding:

I will attend classes regularly.

I will consult with appropriate counsellors if any problems arise academically, emotionally, physically or financially.

I accept and will meet the standards for academic success of the institution to which I have been accepted.

I accept and will meet the standards outlined in the TFN Post Secondary Education Policy.

I will provide official transcripts when requested by TFN.

I will manage to the best of my ability any education assistance funds provided by TFN.

I will follow through with the intent of this application.

I will provide monthly updates via email to the Education Department about the status of my enrolment, course load, and any issues that may arise related to my education.

I certify that I have read the Post Secondary Education Policy, and I agree to abide by the Code of Conduct

I declare that the information I have provided is true and complete to the best of my knowledge. In the event that my application is approved, I understand that providing false or misleading information on this application may result in the termination of funding.

Signature

Date signed

The information in this form is collected under the authority of section 15(c) of the Tsawwassen Freedom of Information and Protection of Privacy Act (FIPPA). The information will be used to facilitate matching Employment Program participants with potential employment opportunities, and will not be otherwise used or disclosed except in accordance with FIPPA. If you have any questions or concerns about the collection and use of this information please contact Tsawwassen First Nation at (604) 943-2112.

Post- Secondary Funding Application Checklist

Your application for Post-Secondary funding will not be considered until all required documents are submitted. Please ensure that you provide all necessary documents from the list below. If a particular document is not applicable to you, please write "N/A" in the space provided.

1. Post-Secondary Funding Application Form	
2. Prior school records from Grade 11 onwards, including any diplomas or certificates achieved (original documents only, photocopies not accepted)	
3. A copy of your previous year's T4 and/or Notice of Assessment from Revenue Canada	
4. A copy of the previous year's T4 and/or Notice of Assessment for your spouse <i>(if applicable)</i>	
5. A letter from your employer indicating your total employment hours per week and anticipated gross monthly salary for the period of study on your application form <i>(if applicable)</i>	
6. A copy of the program calendar for the program and school you are applying to	

Prior to receiving your funding, you must provide:

1. Letter of Acceptance from the program/institution you are applying to	
2. A copy of your official registration for the program	

Education Budget for the _____ - _____ Academic Year

Use this worksheet to calculate your education expenses and the total amount of funding available to you from all sources for the year. Applicants are encouraged to look for additional sources of funding beyond TFN to help offset their education expenses.

Education Expenses for the Year

Registration Fees	\$ _____
Tuition (per year)	\$ _____
Student Fees	\$ _____
Lab Fees	\$ _____
Books	\$ _____
School Supplies	\$ _____
Specialized Equipment:	\$ _____
_____	\$ _____
_____	\$ _____
Other Expenses:	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Expenses for the Year	\$ _____

Education Funding Sources

Scholarships:	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Bursaries:	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Student Loan(s)/Line of Credit	\$ _____
_____	\$ _____
Other sources:	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Amount requested from TFN	\$ _____
Total Funding for the Year	\$ _____

Monthly Budget Worksheet

Use this worksheet to calculate your monthly expenses and your monthly income while you are going to school. If you do not know the exact amount, provide your best estimate. If you are sharing monthly expenses with another person (e.g. a spouse or roommate), provide your monthly share of the expenses.

Monthly Living Expenses	
Rent/Mortgage	\$
Property Taxes	\$
Utilities	
Natural Gas	\$
Hydro/Power	\$
Other	\$
TV/Cable	\$
Internet	\$
Telephone/Cell	\$
Transportation	
Public Transit	\$
Car payment	\$
Insurance	\$
Gas	\$
Food/Groceries	\$
Child Care	\$
Medical/Dental	\$
Credit Card Payment	\$
Loan Payment	\$
Other Expenses:	
	\$
	\$
	\$
	\$
	\$
	\$

Monthly Income	
Employment income	\$
Other income sources:	
	\$
	\$
	\$
TFN Living Allowance	\$

Total Monthly Income	\$
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Total Monthly Expenses	\$
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