



YOUTH AND EDUCATION SUPPORT SERVICES 2021-2022 GENERAL APPLICATION FORM

The information on this form is collected under the authority of Section 9 of the Education, Health and Social Development Act (TFN). This information will be used to monitor attendance records, academic school support and TFN publication of photos. If you have any questions about the collection or use of this information, please contact the Education Team at 604-948-5304.

STUDENT INFORMATION (please provide all information)

STUDENT FULL NAME: _____ DATE OF BIRTH: _____

TFN MEMBERSHIP #: _____ PHONE NUMBER: _____

HOME ADDRESS: _____

EMAIL ADDRESS: _____

STUDENT SCHOOL INFORMATION (please provide all information)

SCHOOL NAME: _____ GRADE: _____

SCHOOL ADDRESS: _____

SCHOOL PHONE NUMBER: _____ SCHOOL FAX NUMBER: _____

PLEASE CHECK ALL BOXES BELOW FOR SUPPORT SERVICES AND GRANTS THAT YOU WISH TO APPLY FOR
(PLEASE REVIEW POLICY GUIDELINES TO ENSURE YOU MEET CRITERIA):

Monthly Student Allowance (*amounts between \$20-\$35/month for students in Grade 7-12 (September to June)*)
Cheque is made payable to the student

Instructional Support Services (*\$200 per student for all TFN students in K- Grade 12 (September to June)*)
(must complete Acknowledgement and Declaration on page 3)

Child and Youth Grant (*\$500 per student in K-Grade 12 (one per fiscal year – April 1 to March 31)*)

Program Name: _____ Type of Activity: _____

Organization: _____

Start Date of Program: _____ End Date of Program: _____

Cheque is made payable to the parent or guardian (must complete Acknowledgement and Declaration on page 3)

Mandatory School Supplies and Full Participation School Trips (*up to \$300 per student in Grades 6-12 (September to June)*)

I am applying for funding in the amount of \$ _____ (payable directly to the school) for a:

Full participation school trip or

Mandatory school related equipment or supplies:

Description: (please provide detailed paperwork from the school) ***Payment is made directly to the school***

Graduation Completion Award *(one-time award per TFN student who graduates with a secondary school diploma or a post-secondary certificate, diploma, or degree) (students must provide certificate or diploma)*

- | | | |
|--|--|---|
| High School | College, Technical/Justice Institute | University |
| <input type="checkbox"/> School Completion | <input type="checkbox"/> One-year PS Certificate | <input type="checkbox"/> Undergraduate Degree |
| <input type="checkbox"/> Adult Graduation | <input type="checkbox"/> Two-year PS Certificate | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Graduation | <input type="checkbox"/> Trade Certificate | <input type="checkbox"/> Doctorate |

****Cheque is made payable to the student****

TFN Graduation Celebration: If you or your child will be graduating and you plan to attend the Graduation Dinner, or would like to have your own or your child's name recognized at the Dinner, please check here

Grad Expense Funding *(\$300 per student in Grade 12)*

****Cheque is made payable to the parent or guardian (must complete Acknowledgement and Declaration on page 3)****

I give permission to Tsawwassen First Nation for the following:

- Access to my/my child's school attendance records (required for Monthly Student Allowance)
- Access to my/my child's academic school records including IEP (academic school support)
- Publication by TFN of photos of myself/my child taken at school or at the TFN youth centre

I hereby certify that the information contained in this form is complete and correct to the best of my knowledge:

Student Signature

Parent/Guardian Signature*

Date Signed

Date Signed

****Parent/guardian signature is required if the student is under 18 years of age. For students aged 18 and older, only the student's signature is required.***

ACKNOWLEDGEMENT and DECLARATION in RESPECT of a PAYMENT to LEGAL GUARDIAN(S) on BEHALF of a MINOR

Complete this section if you are applying for the Instructional Support Services grant, Grad Expense Funding, and/or the Child and Youth Grant.

If the child is in the care of both parents, the cheque for these grants will be payable to the Tsawwassen Member parent. If both parents are Tsawwassen Members, or if the child is in the care of a non-Member parent or guardian, Please indicate the name that the cheque should be made out to:

I/We represent and declare that I/We am/are the legal guardian(s) of the above named Tsawwassen Member child and that the funds received in respect of the minor will be used for his or her benefit.

Parent/Guardian #1

Parent/Guardian #2

Name

Name

Address

Address

Phone

Phone

Signature

Signature

Witness for Parent/Guardian #1

Witness for Parent/Guardian #2

Print Name

Print Name

Signature

Signature

SIGNED at: _____ (town, country), this _____ (day) of _____ (month), 20_____.

Please note: Should the child be in the custody of a non-parental guardian or if one parent has sole custody, attach a copy of a valid court order each year. If no valid court order exists, or if there are special circumstances, direct your request for payment to the Education and Skills Development Manager.

OFFICE USE ONLY:

Instructional Support

Date: _____ Dept: _____ Amount: _____ Payable to: _____ Initials: _____

Youth Grant

Date: _____ Dept: _____ Amount: _____ Payable to: _____ Initials: _____

Grad Expense Funding

Date: _____ Dept: _____ Amount: _____ Payable to: _____ Initials: _____

Grad Completion Award

Date: _____ Dept: _____ Amount: _____ Payable to: _____ Initials: _____

Mandatory School Expense

Date: _____ Dept: _____ Amount: _____ Payable to: _____ Initials: _____

Manager approval: _____