

Date Received:

**Lil'wat Nation
Ts'zil Learning Center**



P.O. Box 232 • Mount Currie • British Columbia • V0N 2K0 • Phone:604-894-2300

Application for Sponsorship for 2019 - 2020
Lil'wat Nation: Post-Secondary Student Support Program

To ensure that your application is considered for sponsorship, please turn in:

- Sponsorship Application (attached)
- Acceptance letter from College/University
- List of program's Admission Requirements (ex. Eng 12, Math 11, etc.) - check online program description
- Proof of completion of any Admission Requirements
- Most recent **official** transcript from High School and/or College/University or confirmation of order being sent to Ts'zil Learning Centre
- List of classes
- A copy of valid Status Card (front and back)
- SIN number
- Family Information Page
- Bank deposit form with Official Bank stamp (if applying for full-time living allowance)
- Canada Child Tax Benefit Form* and/or spouse's *T4 Income Tax Return* (if claiming dependents)
- Read Lil'wat Nation's *Post-Secondary Funding Policy* (check here to state you read policy)

For External College/University students only (not Ts'zil):

- Description of Program of Study (including Admission Requirements) – print from school's website
- Cost of Program's Tuition & Fees
- Cost of Textbooks & Supplies – Please provide this information asap if not available to Coordinator

Please contact us if you have any questions or if you would like to make an appointment:

- **Telephone** (604) 894-2300
- **Education Coordinator** casey.dick-wyatt@lilwat.ca
- **Receptionist/Administrative Assistant** victoria.ioe@lilwat.ca
- **Learning Facilitator** lisa.fisher@lilwat.ca

DEADLINE for September start: May 1, 2019

Lil'wat Nation Application: Post-Secondary Sponsorship

Personal Information

Last Name: _____ First Name: _____ Middle Name: _____

Previous Name: _____ Date of Birth: _____

Female Male Two-Spirit Non-Binary Unspecified Prefer not to say

Status Number: **557** _____ Social Insurance Number: _____

Currently: (circle one) Student Employed Unemployed Social Assistance Other: _____

Marital Status: (circle one) Single Married/Common Law Other: _____

Spouse: (circle one, if applicable) Employed Unemployed Social Assistance Other: _____

Who do you live with? (circle one) Parents Spouse/Partner Other _____

Do you plan to live in *On-campus Student Housing*? Yes No Cost \$ _____

Dependents*:

Name(s)	Birth date(s)	Relationship to Applicant
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

*If claiming dependents, please attach a copy of this year's *Canada Child Tax Benefit Form* (for children) and either a copy of the spouse's *T4 - Income Tax Return* or a statement of his/her earnings (for a dependent spouse).

Current Mailing Address: _____

Contact Details: Cell # _____
Home # _____
Email address _____
Facebook name (optional) _____

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Education – Program Information

A. Program Information:

- Name of Program being sought _____
- Level of Program being sought: (circle one)
ABE / UCEP Certificate Diploma BA/BS Degree Master's Degree Other _____
- Name & Address of College/University applied to:

B. Check the Eligibility of your program:

- Is this an eligible *school*? (Check school list in Funding Policy) Yes No
- Is this an eligible *program*? (Is it accredited? Does it require either a Grade 12 graduation/ equivalent OR a Grade 12 course?) Yes No
- Is the program at least 1 academic year in length? Yes No

C. What are the school's Admission Requirements to be accepted in this program?

- Grade 12 Graduation/equivalent English 12 Math 10/11/12 other _____
- Have you met these requirements? Yes No (Please send transcript to show this)

D. Requesting sponsorship for:

- Full-time (includes; living allowance, tuition & required books/supplies)
- OR**
- Part-time (includes; tuition, books & supplies only)
- OR**
- Partial Funding (includes; tuition or books & supplies or student fees or examination fees)

E. Type of Instruction: In Classroom On-line/Distance Education Combination

F. Dates:

- Length of entire program: _____ Years and/or _____ Months
- Your current year of study: 1st 2nd 3rd 4th 5th
- Please state the start & end dates for **the 2019-2020 year**: (ex. 9/6/19 to 4/28/20)
Start date: (mm/dd/ yyyy) _____ End date: (mm/dd/ yyyy) _____
- Expected Graduation/Completion date (mm/dd/ yyyy) _____

G. Levels (credentials) obtained to date: (please circle)

High School Completion Certificate Adult Grad Certificate First Nations Graduation Diploma Dogwood
UCEP Certificate Diploma Bachelor's Degree Master's Degree

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H. Have you been sponsored as a student by the MCB in the past? Yes No

*If yes: Part-time **OR** Full-time (with living allowance) **OR** Partial Funding

Dates previously funded: _____

Name of Program _____ Name of School _____

Did you complete/graduate from the program? Yes No

Education Letter of Intent (Questions)

Please let us know your plans by **either** completing the questions below or attaching your own letter:

Educational goals achieved so far:

Ex. I made it to grade 10 in High School, I started this program...

Educational goals wanting to achieve now:

Ex. I want to finish my grade 12, or upgrade for a program, take some courses towards, begin this program...

Educational goals for my future:

Ex. I want to graduate with a diploma, master's degree, doctorate in...

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Classes I plan on taking NEXT semester:

List class names, and if known the course numbers and amount of credits for each course that you plan on taking *for the upcoming* semester. Students applying for living allowance **MUST** take a full-time course load (minimum of nine credits per semester).

Course Names	Course #	# of Credits
1.		
2.		
3.		
4.		
5.		

Educational Services & Medical/Physical Conditions (optional)

Did you receive any of the following services in Elementary or Secondary School?

- | | |
|---|---|
| <input type="checkbox"/> Individualized Educational Program (IEP) | <input type="checkbox"/> Modified Program |
| <input type="checkbox"/> Worked with Resource Teacher | <input type="checkbox"/> Other _____ |

To help us better serve you, please let us know if you have any medical/physical conditions:

- | | |
|---|--|
| <input type="checkbox"/> Food Allergies:
_____ | <input type="checkbox"/> Hearing:
_____ |
| <input type="checkbox"/> Medical:
_____ | <input type="checkbox"/> Vision:
_____ |
| <input type="checkbox"/> Other:
_____ | |

Program Costs (Do NOT complete if attending Ts'zil Learning Centre)

IMPORTANT: According to Lil'wat Nation Policy, the LN will only cover **up to \$5,000 a semester for tuition & \$1,000 for Required books/supplies**. Students will be responsible for paying anything over \$5,000 for tuition and/or \$1,000 for books/supplies each semester. In addition, the student will need to provide proof of external funding (student loan, employment, family support, etc) to be considered. Please list costs below:

TUITION & FEES

- Program deposit (if applicable) \$ _____
- Summer 2019 Tuition \$ _____ Student Fees \$ _____
- Fall 2019: Tuition \$ _____ Student Fees \$ _____
- Spring 2020: Tuition \$ _____ Student Fees \$ _____

TOTAL tuition & fees for the year: \$ _____

Lil'wat Nation Application: Post-Secondary Sponsorship BOOKS & REQUIRED SUPPLIES

- Summer 2019 Books/supplies \$ _____
- Fall 2019: Books/supplies \$ _____
- Spring 2020: Books/supplies \$ _____

TOTAL books & required supplies for the year: \$ _____

*** Please write your estimate here and send a list of actual books/supplies & costs once you know them.

Student Agreement & Signature (All applicants)

SIGN HERE ----->	<p>I have read & agree to comply with the LN Post-Secondary Funding Policy. I have completed this application with my correct information.</p> <p>_____</p> <p style="display: flex; justify-content: space-between;"> Signature Date </p> <p>_____</p> <p>Printed Name</p>
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Family Information

Your Information

Your First & Last Name: _____

Your Lil'wat (Ucwalmicwts) name, if you have one: _____

Your Family's Information

Please write your parents & grandparents' English & Lil'wat (Ucwalmicwts) names:

MOTHER'S SIDE	English Name	Lil'wat (Ucwalmicwts) name
Your Mother		
Your Maternal Grandmother		
Your Maternal Grandfather		

FATHER'S SIDE	English Name	Lil'wat (Ucwalmicwts) name
Your Father		
Your Paternal Grandmother		
Your Paternal Grandfather		

