



## KLAHOOSE FIRST NATION POST SECONDARY EDUCATION APPLICATION FORM

APPLICATION DEADLINE DATES (Check applicable)

FALL (SEPTEMBER) ENROLLMENT May 15<sup>th</sup> 2018 

Part One: Student Information	
Birth date (E.G. May 10, 1973)	
Last Name	
First Name	
Middle Name	
SIN #	
Status #	
Mailing Address	
Address	
City	
Province	
Postal Code	
Phone	
Cell	
Email Address	
Marital Status	Single <input type="checkbox"/> Married / Common Law <input type="checkbox"/>

Dependent Information (if you have more than six dependents, please add the others with their birthdates and gender on the back of this page.)	
Name	Birth date (i.e. November 2, 2006)

Part Two: Institution and Program Information	
Institution	
Student Number	
Program	
Program Length	
Year of Study	
Program Type	
Enrolled in	Full-time Studies <input type="checkbox"/> Part-time Studies <input type="checkbox"/>

**Part 3: Planned Course Load (Semester Term)**

September - December	January - April	May - August

Estimated Cost of Tuition per Term: \$ \_\_\_\_\_

**Attachments needed for New Students:**

- Copy of High School Transcripts (when available)
- Letter of acceptance from the program/ institution in which the student intends to enroll

I confirm that the above information provided is complete and accurate. I accept responsibility for satisfying the academic requirements of the above institution and managing the education funds to the best of my ability.

Student Signature

Date

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Mail to: Julie Hanuse, Education Coordinator  
 Box 9 Squirrel Cove, B.C. V0P 1T0  
 Email: [juliehanuse@klahoose.org](mailto:juliehanuse@klahoose.org)  
 Fax: 250-935-6997

**PROGRESS REPORT FORM**

This form is to be submitted to the Educational Coordinator mid-term, prior to the next month's funding cheque being issued. Failure to submit the progress report will result in the next month's cheque being withheld.

Students Name		School	
Month		Student #	

Course Name:
Progress (circle one): D C- C C+ B- B B+ A- A A+
Attendance (indicate if student has had absences):
Instructors Comments:
Instructors Signature:

Course Name:
Progress (circle one): D C- C C+ B- B B+ A- A A+
Attendance (indicate if student has had absences):
Instructors Comments:
Instructors Signature:

Course Name:
Progress (circle one): D C- C C+ B- B B+ A- A A+
Attendance (indicate if student has had absences):
Instructors Comments:
Instructors Signature:

Course Name:
Progress (circle one): D C- C C+ B- B B+ A- A A+
Attendance (indicate if student has had absences):
Instructors Comments:
Instructors Signature:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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**RECORDS RELEASE AUTHORIZATION FORM**

I hereby authorize the Registrar/Records Office to release information to my sponsor, the Klahoose First Nation, regarding my education while in attendance at said institution. (initial) \_\_\_\_\_

I will notify the Klahoose First Nation Education Coordinator *immediately* upon the date of withdrawal of any course sponsored by the Klahoose First Nation.

(initial) \_\_\_\_\_

I will provide the Klahoose First Nation with my transcripts within four weeks of completion of each semester.

(initial) \_\_\_\_\_

I acknowledge it is my responsibility to notify the Klahoose First Nation when a letter of sponsorship is required for each semester attended.

(initial) \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Signature of Education Coordinator

\_\_\_\_\_

Signature of Band Administrator

Date: \_\_\_\_\_

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