Mamalilikulla First Nation

#168-1436 Island Highway, Campbell River BC V9W 8C9 (ph) 250-287-2955 (fax) 250-287-4655 toll free 1-888-287-2955 admin@mamalilikulla.ca

APPLICATION FOR POST-SECONDARY FUNDING

STUDENT INFORMATION

Name: Address: Date of Birth: City: Phone Number: Prov. / Postal Code: Cell Number: Email: Marital Status: Will you be residing with Parents? Yes / No Dependants: Yes / No Number of Children: Reside on / off reserve: Student Type: Continuing Student New Secondary Graduate Are you Working? Yes / No Institution and Program Information Institution: Program: Year of Study: Expected completion date: Semester Funding: Sept – Dec Jan – April Mature Student Mature Student Mature Student Mature Part time Program Length: Year of Study: Expected Completion date: Number of Credits needed to complete: Program Type: University / College Prep Certificate (less than one year) Diploma Bachelor Master's Degree Doctorate			
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Jan – April Bachelor Master's Degree	Sept – Dec		
Master's Degree			
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May – Aug Doctorate	_		
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Previous Education,	Training or Cert	ificates		
School / Institute	Voore Attended	Certificate Obtained		
	Years Attended	Certificate Obtained		
Secondary: Private:				
College:				
Technical Institute:				
University:				
Other:				
Additiona	al Documents - B	e sure to include		
Signed Release of Information				
Most recent Official Transcript				
Acceptance Letter from College or University				
Photocopy of Status Card (front and back)				
Budget	Information			
Tuition – Sept to Dec.	\$			
Tuition – Jan to April	\$			
Tuition – May to August	\$			
Number of Months Living Allowance	\$			
Book Allowance Needed				
Does your program require additional supplies?	Yes / No			
(i.e.; boots, nursing scrubs, etc., that are deemed as mandatory for your program)				
Agreement				
I confirm that the above information provided is confirm that the above information provided is confirmed and the Guidelines. I accept the responsibility for satisfication and managing the education funds to the	omplete and accu d agree to comply isfying the acaden	with the conditions as set out in nic requirements of the above		
Student Signature		Date		