

Mamalilikulla First Nation

#168-1436 Island Highway, Campbell River BC V9W 8C9
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LIVING ALLOWANCE CRITERIA FORM

Student Name:	Application Date:

Funding Level Criteria:	Check one of each:		
Is this Application:	New	Amended	
Marital Status: (*Common law must be living together for 1 year or more)	Single	Married	*Common Law
If single, are you living with an employed parent?	Yes	No	
If married, is your spouse employed?	Yes	No	

Dependents (List and attach a copy of birth certificates (s) – must be 18 years of age and under and living in the same household to claim as dependent(s))

NAME	RELATIONSHIP	BIRTHDATE

I confirm that the above information is complete and true and agree that I will advise you of any changes to the above information within 15 days of any changes.

 Signature of Student Date

Office use	
Calculation of monthly living allowance based on rates for resourcing monthly living allowance schedule: \$ _____	
Approved By: _____	Date: _____