

**Vuntut Gwitchin Education
Criteria Checklist**

1. _____ Are you a beneficiary of the Vuntut Gwitchin First Nation?
2. _____ Have you been accepted into a recognized educational institution?
3. _____ Have you attached their confirmation of acceptance to your application form?
4. _____ Have you requested an Official Transcript for the last period of study?(Official transcripts have to be sent from the institution not the student.)
5. _____ Did you attach a 200-500 word summary of your career plan to the application?

The above checklist should all be “YES”

Vuntut Gwitchin First Nation Application form

A. Personal Information

Name: _____
Date of Birth: _____ Male: _____ Female: _____
Social Insurance Number: _____ Status Number: _____
Marital Status: _____ Name of Spouse: _____
Single living w/ Parents: _____ Married w/ Employed spouse: _____

B. Address

Permanent: _____ Prov/ Terr: _____
Postal Code: _____ Phone: _____ Fax: _____
Email: _____

Where cheques are to be mail to

_____ Pov/ Terr: _____
Postal code: _____ or
Td Canada Trust Bank Account # Branch: _____ Account #: _____
Please attach a direct deposit application form from your bank

C. Dependents

<u>NAMES</u>	<u>DOB</u>	<u>RELASIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Residency

Are you a resident of Old Crow: Yes _____ No _____
if so, how long have you been a resident of Old Crow: Years _____ All my life _____
if not, How many years have you lived outside Old Crow: Years _____ All my life _____

E. Proposed Studies (this part must be filled out)

Program/ Course: _____
Name of Institution: _____
Community/ Prov of Course: _____
Length of Program/ Course: _____
Date Program/ Course Begins/ ends: Mth/ Day/ Yr _____ to Mth/ Day/ Yr _____
Level of study: _____ Certificate _____ Diploma _____ Bachelors _____ Masters _____
_____ Doctorate
Current year: _____ Year 1 _____ Year 2 _____ Year 3 _____ Year 4 _____ Other _____
Will you be a full time student? ____ Yes ____ No Part time? ____ Yes ____ No

F. Other Agencies You Have Applied To For Funding

<u>Names</u>	<u>Approved/ Pending</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

G. Financial Information

If you will be receiving assistance from your employer, please state amount: \$ _____ per school year \$ _____ per school month Please list source of income. Including any financial support from your Family:

Source	Amount
_____	_____
_____	_____
_____	_____

All applications are to be mailed or faxed to: Post Secondary Education, Vuntut Gwitchin First Nation Box 94 Old Crow, YT Y0B 1N0. Phone: 867-966-3261 Fax: 867-966-3800

If faxing, please follow up with a telephone call to confirm receipt

Vuntut Gwitchin First Nation
Promissory Note

This is to confirm that I was approved to receive student financial assistance for either tuition, Book Supplies, Living Allowance, VGFN Top up and travel for the school year _____.

Consequently, this note confirms that, should I not complete my program without valid reason, I will repay to the Vuntut Gwitchin Training Fund the amount I received towards my education.

This is part of the Student Financial Assistance Policy as stated in Section 6, Termination of Assistance.

Student Name (print)

Student Signature

Witness Name (print)

Witness Signature

Date

Vuntut Gwitchin First Nation

Affidavit

I hereby declare that, to the best of my ability, all information provided is complete and true and that any misleading or fraudulent information will disqualify me from obtaining this and other scholarships or funding that is offered by the Vuntut Gwitchin or its affiliates and subsidiaries.

I agree that if I am suspended, released or do not return for any portion of my program, or if for any unjustified reason, I do not complete my full year; I will be required to reimburse the Vuntut Gwitchin Scholarship Fund the full amount of the scholarship/ financial support received.

I further understand that if I am suspended or do not return for any portion of my program, or if for any unjustified reason, I do not complete my full year, I may not be considered for further assistance from the Vuntut Gwitchin or its affiliates and subsidiaries.

Name (print): _____

Signature: _____

Date: _____

Please ensure that the following information is attached:

- A copy of a letter of acceptance from the institution.
- An official transcript of your last period of study.
- Confirmation of other sources of funding or financial assistance.
- Other information, e.g: letter of reference, letter of intent.

June 1st, 2007

I _____ authorize the Vuntut Gwitchin First Nation Department of Education to request information and documentation from any educational institution regarding my academic progress, attendance and official transcripts.

I declare that the information provided in this application is complete and true, and that false statements or information may result in the termination of benefits, the recovery of benefits paid and ineligibility to receive further funding

Student Signature

Date

For Office Use Only

Received

Application form received on: _____

Reviewed

Application was: Approved: _____ Rejected: _____

Reason for Rejection:

Informed

Applicant was informed on: _____

Applicant was informed by: _____ Mail _____ Fax _____ Phone _____ Person _____ Email

Applicant was informed from: _____

All Applicants Will be Informed in Writing as Soon as Possible

K. Financial Assistance

I am paying for:

Financial Assistance (to cover tuition/ books) \$500.00 _____

Scholarships: (tick the one most relevant to your propose studies)

- a) General \$500.00 _____
- b) Administration \$1000.00 _____
- c) Social Development \$500.00 _____
- d) Commerce \$1000.00 _____
- e) Natural Resources \$1000.00 _____