Congratulations on your decision to pursue a post-secondary education!

A student may apply for the NTC Post–Secondary Funding program if they are from one of the following Nuu-chah-nulth Nations:

<table>
<thead>
<tr>
<th>Ditidaht</th>
<th>Hupacasath</th>
<th>Tla-o-qui-aht</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ehattesaht</td>
<td>Mowachaht/Muchalaht</td>
<td>Tseshah</td>
</tr>
<tr>
<td>Hesquiaht</td>
<td>Nuchatlaht</td>
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</tr>
</tbody>
</table>

**Post-Secondary Funding Services**

The NTC Post-Secondary Program provides funding sponsorships to students who wish to pursue a post-secondary education. Full or partial funding may be provided to the student to support the cost of tuition, living expenses, required textbooks and supplies, travel, tutoring and other school-related expenses (in accordance with ISC policy guidelines and the NTC Post-Secondary Funding Policy).

Students who wish to receive supports from the NTC are required to submit an NTC Post-Secondary Funding Application to the NTC Post-Secondary Funding Program each year for the duration of their studies. The NTC encourages members who are considering post-secondary studies to contact the NTC Post-Secondary Program staff for support.

Complete applications increase the chances of being successfully accepted into the Post-Secondary Funding Program and incomplete applications may result in not qualifying for funding. Please refer to the application attached and the checklist below to complete your application for funding.

**INCOMPLETE APPLICATIONS WILL RESULT IN THE DELAY OF YOUR APPLICATION BEING CONSIDERED FOR FUNDING OR DISQUALIFY YOU FROM THE NTC POST-SECONDARY FUNDING PROGRAM!**

### APPLICATION CHECKLIST

| PART ONE: All Fields Complete | PART SIX: Most Recent Transcript Attached |
| PART TWO: All Fields Complete | PART SEVEN: All Fields Complete |
| PART THREE: All Fields Complete | PART EIGHT: Consent Signed and Dated |
| PART FOUR: Supporting Documents Added | PART NINE: Declaration Signed and Dated |
| PART FIVE: Most Recent CCB Attached |  |
NTC POST-SECONDARY FUNDING DEADLINES

- MARCH 1\(^{ST}\) (Classes Start: September – December of the same year)
- AUGUST 1\(^{ST}\) (Classes Start: January – August of the following year)

<table>
<thead>
<tr>
<th>Program Start Date: (Upcoming Academic Year)</th>
<th>Day</th>
<th>Month</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>For office use only – Received Date:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PART ONE: STUDENT INFORMATION – all fields must be completed

- Last Name: 
- Middle Name: 
- First Name: 
- Previous Last Name: 
- Previous First Name: 
- Birthdate: Day / Month / Year 
- SIN # 
- Gender: □ Male □ Female 
- Marital Status: □ Single □ Married □ Common-Law □ Separated □ Divorced 
- Name of Spouse: ___________________________ (if applicable) 
- Nuu-chah-nulth First Nation: ___________________________ 
- Status Number / IRN#: ___________________________ 
- Are you currently transferring between First Nation? □ No □ Yes – attach supporting documentation 

PART TWO: CONTACT INFORMATION – all fields must be completed

- Mailing Street Address: 
- City: 
- Province: 
- Postal Code: 
- Phone #: 
- Home #: 
- E-mail Address: 

- Are you moving away from your permanent address to a temporary address to attend Post-Secondary studies? □ Yes □ No 

FOR OFFICE USE ONLY

- Application Received on time: □ Yes □ No 
- Waitlisted: □ Yes □ No 
- Waitlist#: 

Aug 2021
## PART THREE: PROGRAM INFORMATION – all fields must be completed

### Semester Funding (check all that apply):
- [ ] Sep – Dec (This Year)
- [ ] Jan – Apr (Next Year)
- [ ] May – Aug (Next Year)
- [ ] Other Dates (specify): ________________

### Student Type (check one):
- [ ] New (New program or New student to NTC PS Funding)
- [ ] Continuing (Attended same program last semester)
- [ ] Returning (Going back after year(s) off)

<table>
<thead>
<tr>
<th>Program Name: (as shown on Acceptance Letter, Transcript, or website)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Institution Name:</td>
<td></td>
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</tbody>
</table>

- [ ] University College Entrance Program (UCEPP)  
  (College Preparation or Adult Basic Education)

- [ ] Certificate Program  
  (usually up to a 12 month program)

- [ ] Diploma Program  
  (usually a two year program)

- [ ] Bachelor Degree
  - [ ] Arts
  - [ ] Science
  - [ ] Education
  - [ ] Other Bachelor Degree, please specify: ________________

<table>
<thead>
<tr>
<th>Major: ________________</th>
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<tbody>
<tr>
<td>Minor: ________________</td>
<td></td>
</tr>
</tbody>
</table>

- [ ] Year 1 of 2
- [ ] Year 2 of 2

- [ ] Year 1 of 4
- [ ] Year 2 of 4
- [ ] Year 3 of 4
- [ ] Year 4 of 4
- [ ] Year __ of __

### Start Date  
Month / Day / Year

| End Date  
Month / Day / Year |  |
| --- | --- |

- [ ] Full-Time (as defined by the Institution)
- [ ] Part-Time (as defined by the Institution)

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## PART FOUR: ABILITY INFORMATION

### Disability Status:
- [ ] Not on Disability
- [ ] Yes (supporting documentation is REQUIRED)

<table>
<thead>
<tr>
<th>Type of Disability:</th>
<th></th>
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<tbody>
<tr>
<td>Long-term</td>
<td></td>
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<tr>
<td>Short-term</td>
<td></td>
</tr>
<tr>
<td>Learning</td>
<td></td>
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Aug 2021  3
PART FIVE: DEPENDENT INFORMATION
Please attach the most recent Canada Child Benefit (CCB Notice) account summary from Canada Revenue
Agency (CRA) listing each dependent’s name.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Relationship (ie. son, daughter, spouse)</th>
<th>Birthdate (ie. May 2, 2019)</th>
<th>Gender</th>
</tr>
</thead>
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<td>□ M □ F</td>
</tr>
</tbody>
</table>

PART SIX: EDUCATIONAL HISTORY – all fields must be completed
What is the highest level of education that you have completed to date:
☐ Grade 12 ☐ Adult Ed. ☐ Certificate ☐ Diploma ☐ BA/BSc/LLB ☐ MA, LLM ☐ PhD ☐ PDP
☐ Other, please describe:

Attached is a copy the most recent transcript (Required): ☐ Yes ☐ No, transcript will follow

Have you taken any dual credit courses? If yes, please name the course and school.

Have you been previously sponsored by NTC for upgrading or any post-secondary studies: ☐ No ☐ Yes
If yes, provide: Date: ______________ Program: ___________________ Institution: ____________________

If yes, have you ever been: ☐ Suspended from NTC P/S Funding ☐ Put on Academic Probation
If so, what have you done since that time to help ensure you are more successful? Please explain: (attach another page if needed)

PART SEVEN: EDUCATIONAL GOALS – all fields must be completed
For the upcoming funding year I plan to complete the following courses:

My long-term goal is (provide as much detail as possible):
PART EIGHT: CONSENT TO RELEASE INFORMATION

A. Please note that NTC reserves the right to share information within NTC Departments and Programs for the sole purpose of determining eligibility and funding level.

B. I provide my consent to allow the Nuu-chah-nulth Post-Secondary Education program staff to request copies of information from the Educational Institution listed above for the sole purposes of determining my eligibility for University College Entrance Preparation or Post-Secondary Student Support Funding.

C. I provide my consent to allow the Nuu-chah-nulth Post-Secondary Education program staff to request copies of information from the Ministry of Children and Family Development and/or the Usma Child and Family Services, and the Ministry of Income Assistance for the sole purposes of determining my eligibility for Post-Secondary Funding.

D. I provide my consent to allow Nuu-chah-nulth Post-Secondary Education program staff to share information about my post-Secondary funding with my First Nation.

E. I provide consent to allow the Nuu-chah-nulth Post-Secondary program staff to discuss my funding application and file with:

☐ My parents and/or guardian Name: ____________________________________________
☐ Other ____________________________________________

Student Signature: __________________________ Date: __________________________

PART NINE: DECLARATION

I, ____________________________ certify that the information provided in the Application for Funding for the NTC Post-secondary Funding Program and supporting documents is current and accurate to the best of my knowledge.

Student Signature: __________________________ Date: __________________________

PLEASE ENSURE ALL APPLICABLE FIELDS ARE FILLED OUT COMPLETELY. INCOMPLETE FIELDS MAY AFFECT YOUR ELIGIBILITY AND YOUR FUNDING LEVEL.