



This application requires the following documents:

- Personal Info:
  - Full Name (Last, First Middle)
  - Date of Birth
  - Indian Registration # (Status #)
    - You must be registered to Tl'etinqox (712) in order to qualify for sponsorship
  - List of Dependents (if applicable)
    - Submit a copy of the birth certificate of each dependent
- High School Transcript
  - An official transcript needs to be mailed to TGO, address listed below
- Post Secondary Transcript
  - An official transcript needs to be mailed to TGO, address listed below
- Acceptance letter from Institution
- 3<sup>rd</sup> Party sponsorship letter
  - If there is another company willing to pay for your tuition and books, submit the letter of acceptance of sponsorship
    - Be sure that it states what they are willing to pay for
- One page letter outlining career and education goals
  - In this letter I ask that the students share the following information:
    - Introduce themselves
      - Who your parents are
      - How you are a member of Tl'etinqox
      - Where you have been living
      - What you have been doing up until now
      - Why you choose to go back to school
    - Program information
      - What institution you are planning to attend
      - What program you got accepted into
      - Length of your program
      - When you plan to complete the program
    - How you are willing to give back to the community once you complete your program
      - If you list options as to how you are able to give back, that would help a lot
        - Example: working for TGO in a selected field when your program is completed
  - The Education Portfolio holders read this letter word-for-word, so the more details put into this letter the better as they like to get to know all of the students

The deadline for applications is the first Thursday in May (every year) @ 4:30pm for the upcoming Fall semester and the first Thursday in November (every year) @ 4:30pm for the upcoming Winter semester.

Filling out this application does NOT guarantee funding. In-complete applications will NOT be accepted. Your application will be put in order of priority (1<sup>st</sup>: Continuing, 2<sup>nd</sup>: High School Graduates, 3<sup>rd</sup>: Partly finished/sponsored, 4<sup>th</sup>: anyone that doesn't fit into the first three categories) then in order of when the application was received, all applications will be date stamped. All applications will be reviewed by the Council members that hold the Education portfolio and the Education Department.



Tl'etinqox Government Box 168 Alexis Creek, BC V0L 1A0  
 Phone: (250) 394-4212 Fax: (250) 394-4275

**POST SECONDARY EDUCATION SPONSORSHIP APPLICATION**

DATE: \_\_\_\_\_

**PERSONAL INFORMATION:**

NAME: \_\_\_\_\_  
Last Name First Name

BAND NUMBER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(month/day/year)

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

STATUS:  Single  Married  Common Law

DEPENDENTS:  Yes  No If yes, how many \_\_\_\_\_  
 IF APPLICABLE:

NAMES AND DATES OF BIRTHS OF DEPENDENTS:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**\*NOTE YOU MUST ATTACH PHOTOCOPIES OF DEPENDENTS CARECARDS AND/OR BIRTH CERTIFICATES TO YOUR APPLICATION**

GRADUATED:  YES  NO HIGHSCHOOL: \_\_\_\_\_ YEAR: \_\_\_\_\_

**POST SECONDARY INFORMATION:**

Did you apply for Post Secondary Funding in previous years?  Yes  No If yes, year \_\_\_\_\_

**PREVIOUS EDUCATION AND TRAINING**

Institute Name	Program	Date



Tl'etinqox Government Box 168 Alexis Creek, BC V0L 1A0  
 Phone: (250) 394-4212 Fax: (250) 394-4275

**EDUCATIONAL PLAN AND CAREER GOAL**

Name of Educational Institution applying to: \_\_\_\_\_

Location: \_\_\_\_\_

Academic Advisor Name and Ph No : \_\_\_\_\_

Intended Start Date: \_\_\_\_\_ Expected Graduated Date: \_\_\_\_\_

**Program Type**

Certificate       Diploma       Bachelor       Master's       Doctorate

**Please list your planned course load (first semester to last semester of program type)**

Semester 1				
Semester 2				
Semester 3				
Semester 4				
Semester 5				
Semester 6				
Semester 7				
Semester 8				;
Semester 9				
Semester 10				



---

**CHECKLIST OF DOCUMENTS REQUIRED:**

- HIGHSCHOOL TRANSCRIPT
- OFFICIAL TRANSCRIPT FROM PREVIOUS 2 YEARS
- ACCEPTANCE LETTER FROM INSTITUTION
- LETTER OF REGISTRATION WITH COURSE OUTLINE AND FEES
- 1 PAGE (MIN) LETTER OUTLINING EDUCATION AND CAREER GOALS AND IDENTIFY HOW YOU ARE GOING TO INVEST YOUR EDUCATION BACK INTO THE COMMUNITY OF TL'ETINQOX.

**TL'ETINQOX POST SECONDARY REQUIRED TERMS FOR SPONSORSHIP:**

In agreeing to the following terms, the Tl'etinqox Government has the right to disapprove/suspend/discontinue funding shall the students fail to meet the following requirements.

1. The student must fully complete the application for sponsorship with the required documents
2. The student agrees to notify the Tl'etinqox Education Department immediately of any changes in personal or program information
3. The student agrees to attend class on a regular basis; unexplained absences could result in discontinuation of funding
4. The student agrees to enroll in a minimum of four (4) courses NO online/distance education courses will be covered by the Education Department
5. The student agrees to submit a signed mid-semester evaluation form for each course, until the Fall or Winter transcripts are made available. It is recommended that students maintain a C+ 2.33 average or higher. (Grading varies depending on institutions)
6. The student must pass all of their courses; failures will affect sponsorship and may require repayment of sponsorship
7. The student is required to submit transcripts each semester, if they are not received, sponsorship cheques will be held

I understand and agree to the above 7 sponsorship terms. I understand that should I fail to meet these terms may result in suspension or discontinuation of sponsorship.

**STUDENT NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Student Signature**



**STUDENT DECLARATION:**

I hereby understand and agree to terms outlined in the application for post secondary education assistance for the duration indicated. I declare that the information provided in this application is accurate. I understand that by providing false information, misrepresentation of information or failure to the terms of sponsorship may result in a discontinuation of sponsorship or refusal for future assistance.

I hereby understand that if I misuse Band Education funding under false pretenses, I will be liable for the repayment of educational funds.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Oath of Confidentiality for Education Manager**

I, \_\_\_\_\_, as the Education Manager of the Tl'etinqox Government, do hereby swear that all information received about the above named student will be kept in the strictest of confidence. I fully understand the implications of releasing information about the above named student to any source other than those discussed with the student.

\_\_\_\_\_  
Education Manager, Signature

\_\_\_\_\_  
Date (year/month/day)



Tl'etinqox Government Box 168 Alexis Creek, BC V0L 1A0  
 Phone: (250) 394-4212 Fax: (250) 394-4275

---



**Tl'etinqox Government**

P.O. Box 168  
 Alexis Creek, BC V0L 1A0  
 Ph: 1(888) 224-3322 or (250) 394-4212 ext. 207  
 Fax: (250) 394-4275  
 Melanie Johnny, Education Manager  
 Email: [melanie.johnny@tletinqox.ca](mailto:melanie.johnny@tletinqox.ca)

**STUDENT INFORMATION RELEASE FORM:**

STUDENT NAME: \_\_\_\_\_ Student ID #: \_\_\_\_\_

INSTITUTION NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I hereby authorize the Tl'etinqox Government Education Department to obtain student information on my academic status, including other pertinent information and authorize the Education Department to contact appropriate school officials for copies of my records and transcripts.

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

DATE: \_\_\_\_\_