



Tr'ondëk Hwëch'in Government
P.O. Box 599
Dawson City, Yukon, Y0B 1G0
Phone: (867) 993-7100
/ Toll Free: 1-877-993-3400
Fax: (867) 993-6553
E-mail: melissa.atkinson@trondek.ca

**POST SECONDARY SUPPORT
PROGRAM APPLICATION
INFORMATION AND FORM**

Objective

To encourage and assist Tr'ondëk Hwëch'in citizens to pursue developmental studies, trades programs and/or academic education which will enable them to attain a career of their choice.

Eligibility

All members of the Tr'ondëk Hwëch'in First Nation's Final Agreement who have been accepted into a recognized course of study at a recognized educational facility.

Amount of Financial Assistance

(subject to the availability of funding)

The maximum allowable for full-time students is as follows:

- Tuition & Fees: up to \$2500 per semester or \$5000 per academic year - *paid directly to school*
- Mandatory Textbooks/Supplies: up to \$500 per semester or \$1000 per academic year - *paid directly to school*
- Living Allowance: \$400-\$1200 depending on living situation- *paid to student*
- Other financial requests related to post-secondary studies may be considered (travel, tutoring, etc)

How to Apply

Application forms are available through the Tr'ondëk Hwëch'in Employment & Training Office (Contact 867-993-7100 ext. 111; melissa.atkinson@trondek.ca)

All applications must be completed and returned by the following deadlines:

Fall Semester Start Date:	June 15 th and July 15 th
Winter Semester Start Date:	November 15 th
Spring/Summer Semester Start Date:	April 1 st

LATE APPLICATIONS WILL NOT BE ACCEPTED - NO EXCEPTIONS!

Students who are continuing studies without a break must apply at least once per year for funding; Returning students with one or more semesters off must apply by the deadline for their start date. Applications must include required supporting documentation (see page 8 for a list)

Assessment of Application & Notification

Applications will be reviewed and decisions made by the Education Committee after each application deadline. Applicants should expect to hear from the Employment & Training Officer within two weeks of the designated deadline. The Education Committee makes their decisions based on the Post-Secondary Education & Training Policy. If you would like to review the Policy, please ask the Employment & Training Officer for a copy.

For any questions regarding or to submit this application:

Tr'ondëk Hwëch'in Government
Attention: Melissa Atkinson – Employment & Training Officer
Phone: 867-993-7100 ext. 111 Fax: 867-993-6553
Box 599 Dawson City, YT Y0B 1G0
E-mail: melissa.atkinson@trondek.ca



SECTION A: PERSONAL INFORMATION

First Name	Middle Name	Last Name

Permanent Mailing Address	Town/City	Territory/Province	Postal Code

Contact Number	Alternate Contact Number	Email Address

Gender	Date of Birth (D/M/Y)	Social Insurance Number
<input type="checkbox"/> Male <input type="checkbox"/> Female		

Are you a Tr'ondëk Hwëch'in Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a status card? <input type="checkbox"/> Yes <input type="checkbox"/> No Status Number: _____
---------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------

SECTION B: LIVING STATUS DURING TRAINING

<input type="checkbox"/> Student with Rent Expense <input type="checkbox"/> Student without Rent Expense * Proof of rent expense may be requested	Number of Dependents: _____ (children under 18 living with you)
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------

Please List your Dependents, not including spouse (if more than three (3) list separately)
 * Please include proof of dependants with application

	Name	Birth Date	Relationship
1.			
2.			
3.			

If you feel it is necessary, please explain living situation:

Do you incur childcare costs each month? Yes No

If yes, are you eligible for a childcare subsidy through your provincial/territorial government?

Yes No



SECTION C: EDUCATION HISTORY

EDUCATION TO DATE, LIST MOST RECENT FIRST:

Year	Program	School/Institute	Level Obtained	Funded by TH or INAAC? (Y or N)

CURRENT CERTIFICATES, LICENSES & OTHER TRAINING

--

SECTION D: EMPLOYMENT

Are you currently Employed? Yes No
Are you currently receiving EI Benefits? Yes No
Have you received EI benefits in the last 3 years? Yes No

RELEVANT EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

Year	Job Title	Employer	Duties



SECTION E: NEEDS ASSESSMENT & ACTION PLAN
What is your Occupational or Career Goal?
Has your Occupational Goal changed since your last funding application? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, please explain:
Have you discussed your occupational goal with a career counselor or academic advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Counselor/Advisor: _____
Why are you interested in this field of work? Do you have any experience or background in this field?
How will your chosen institutional training assist you in achieving your goal?
Have you researched the labour market to find out if there are jobs available in your chosen field? What did you find?
Would you consider working for Tr'ondëk Hwëch'in if there are any positions in your field available? <input type="checkbox"/> Yes <input type="checkbox"/> No
How long will it take you to reach your end goal? Please explain.



SECTION F: PROGRAM AND INSTITUTE INFORMATION			
Institute Name:		Location:	
Program/Course:		Description:	
Class Start Date: (M/D/Y)	Class End Date: (M/D/Y)	<input type="checkbox"/> Full-time (3 courses or more) <input type="checkbox"/> Part-time	
Type of Program:			
<input type="checkbox"/> Upgrading/College Prep <input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> Doctorate <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Apprenticeship Trade, Year _____ <input type="checkbox"/> Other			
Periods of Study for this Application:			
<input type="checkbox"/> Fall (Sept-Dec) <input type="checkbox"/> Winter (Jan-Apr) <input type="checkbox"/> Spring (May-Jun) <input type="checkbox"/> Summer (Jul-Aug) If your program is continuous, you may apply for more than one semester at a time, up to a max. of 12 months			
Total Length of Program or Graduation Year Expected:			

*** Please include a Letter of Acceptance / Confirmation of Enrollment with your application**

School Expenses	(\$ / semester)	Estimated Living Expenses	(\$ / month)
Tuition		Rent/Mortgage	
Mandatory Textbooks		Monthly Bills (heat, utilities, phone, internet, etc)	
Mandatory School Supplies, Uniform, etc		Childcare	
Other School Supplies		Food	
Tutoring		Transportation (gas, bus pass, etc)	
Travel Expenses (to relocate)		Other Supplies	
Other: _____ _____ _____		Other: _____ _____ _____	
TOTAL:		TOTAL:	



SECTION H: Designated Representative

Your Designated Representative may be a family member/spouse, a university official or a friend who may need to contact the Employment & Training Department regarding your application/funding on your behalf.

Without listing them below, TH staff will be unable to discuss your file or release information.

I hereby authorize the Employment & Training Department to release any information or documents on file which may be requested from time to time by my Designated Representative(s). I understand that this authorization shall remain in effect until revoked by me in writing.

Name of Designated Representative #1:	Address:	Relationship to Student:
Phone Number:	E-mail:	
Name of Designated Representative #2:	Address:	Relationship to Student:
Phone Number:	E-mail:	
Name of Designated Representative #3:	Address:	Relationship to Student:
Phone Number:	E-mail:	

Notes: _____

Signature, Student

Date



SECTION I: CONTRACT AGREEMENT FOR FINACIAL ASSISTANCE & RELEASE OF INFO

I, _____, accept financial assistance from Tr'ondëk Hwëch'in for my education and training in the form of tuition, textbooks, living allowance and possibly other related expenses, if applicable. Tr'ondëk Hwëch'in has agreed to financially contribute towards my education, and to work with my institution to coordinate sponsorship.

The Program I am enrolled in is: _____

My first day of classes for the current academic year is: _____

My last day of class for the current academic year is: _____

I also agree to have a representative from the Tr'ondëk Hwëch'in Employment & Training Office to check on my attendance and progress reports from _____, where I am attending College/University.

I give consent to representatives of the Tr'ondek Hwech'in to publish my image and non-personal information regarding my studies, program, and awards received for promotional and educational purposes for an indefinite term.

I give my consent for Tr'ondëk Hwëch'in to release the information contained in this form, and authorize the sharing of information related to training/supports/attendance and outcomes regarding participation in an ASETS program, to the Council of Yukon First Nations and Service Canada.

I also understand that any or all funding may cease or be revoked at any time:

- If I fail to complete this training by unauthorized withdrawal or poor attendance;
- If I fail to maintain a minimum of 65% average;
- If I fail to inform the school I am attending or the Tr'ondëk Hwëch'in Employment and Training office any changes in my student status.

I understand that should I fail to comply with the above conditions that I will be held responsible for repayment of all monies spent on my behalf and invoiced accordingly.

Upon completion of the course, I will also provide the Employment & Training Officer with a copy of transcripts and/or certificates received to be kept on file by Tr'ondëk Hwëch'in to null and void repayment of this course.

I would like to be considered for any Bursaries that may be available. (check here)

Signature, Student

Date

Signature, Employment & Training Officer

Date



DID YOU REMEMBER TO INCLUDE?:

(If no, please explain why & when it will be sent)

1. Letter of Acceptance or Confirmation of Enrollment from the Institution

Yes No, Explanation: _____

2. Copy of Most Recent Official Transcripts

Yes No, Explanation: _____

3. Proof of Dependents

Yes N/A No, Explanation: _____

FIRST TIME APPLICANTS ONLY

➤ **Photocopy of Status Card**

Yes N/A No, Explanation: _____

ALL APPLICANTS MUST READ AND SIGN:

I declare the information submitted in this application to be true, correct and complete and that the financial assistance sought will be used solely for education pursuits. I understand that if I have given any false or misleading information, I will be held liable. If I obtain funding under false pretenses I will be liable for full repayment of my grant. I hereby give permission to the Tr'ondëk Hwëch'in to verify the information and approve access of my school record. I will notify the Tr'ondëk Hwëch'in if I withdraw from my course of studies. If I do not complete the studies I have been funded for from Tr'ondëk Hwëch'in I may not be eligible for future funding assistance and will be required to reimburse Tr'ondëk Hwëch'in for the full amount received.

Signature, Student

Date

Bank Deposit Information for Living Allowance Payments:

Bank Name: _____

Institution #: _____ **Transit #:** _____ **Account #:** _____