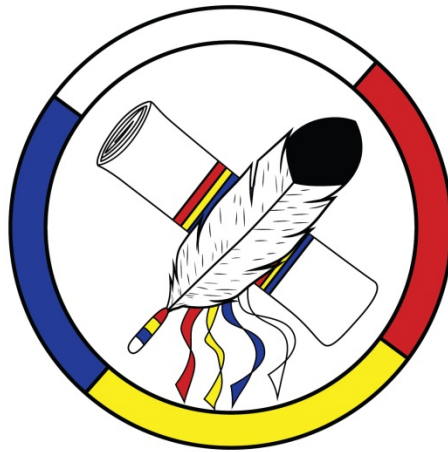


Nipisihkopahk Iyiniwin Trust Fund

Application for Awards Program



APPLICATION DEADLINE

1 year after graduation or convocation

Nipisihkopahk Iyiniwin Trust Fund

Box 658

Maskwacis, Alberta

T0C 1N0

Tel: (780) 585-2211 or (780) 585-2232

Toll Free: 1-800-843-7359

Fax: (780)585-3857

louiseomeasoo@gmail.com

You must provide the following information with your application:

- _____ Most recent transcripts. Please provide marks (transcripts) for the last year you attended.
- _____ Letter of Completion from the recognized educational institution, stating length of program.
- _____ You have signed the attached Release of Information form.
- _____ Official Diploma and/or Certificate

**Post Secondary/Technical & Trades
Programs/Scholarships/Certification Programs
Application for Awards Program**

APPLYING FOR: Academic Year _____

STUDENT INFORMATION:

Name _____

Address

Band N0. _____ Date of Birth _____

Telephone _____ Other Contact _____

PROGRAM INFORMATION:

Name of Program _____

Name of School _____

Location / Address _____

First Day of School _____

Last Day of School _____

How long was your Program _____

Graduation Date _____

Signature _____ Date _____

For Office Use Only

Application Approved: Yes No

If No, reason why: _____

Additional Notes: _____

NITF Coordinator's Signature

Date

Nipisihkopahk Iyiniwin Trust Fund
Adult Upgrading & Adult High School
Authorization for Release of Information

I, _____, **HAVE READ** and do hereby authorize:

(insert name of school / institution)

to release to the Nipisihkopahk Iyiniwin Trust Fund Incentive Program whatever information they may require concerning me. The information to which the Nipisihkopahk Iyiniwin Trust Fund Incentive Program is authorized to obtain includes, but is not limited to the following:

- Official transcripts of grades.
- Details as to my course of study including specific courses taken and class schedule.
- Copies of any notices, advice or direction regarding my ongoing status as a student including attendance reports.
- Information in respect to special assistance payments (if any) to minor children or myself from the Samson Cree Nation Administration or government agency.
- Any information deemed pertinent to my application to the Nipisihkopahk Iyiniwin Trust Fund Incentive Program.

I do hereby agree to notify NITF office in the event:

- that I withdraw from the educational institution I am currently attending;
- that I fail to attend classes for more than five (5) consecutive days.

I trust that this is an irrevocable consent, which the Nipisihkopahk Iyiniwin Trust fund may present from time to time. This consent may not be withdrawn from me for so long as I am receiving sponsorship from the Nipisihkopahk Iyiniwin Trust Fund. I have read and understand the Nipisihkopahk Iyiniwin Trust Fund Policy and agree to follow the procedures contained therein. I further understand that in the event I receive any funds from the Nipisihkopahk Iyiniwin Trust Fund for which I am not entitled to, I agree to reimburse in full said funds and hereby certify that all information in this application is true.

Student's Signature

Date