

# **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**

**Fax: (780)585-3857**

**[larronarchie@gmail.com](mailto:larronarchie@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:

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(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.

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Student's Signature

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Date