APPLICATION FOR SPONSORSHIP

A. INDIGENOUS STATUS

Full Name: _____

Do you identify yourself as an Indigenous person? ☐ Yes ☐ No

If you identify as an Indigenous person, what is your status? ☐ Status ☐ Non-status ☐ Metis ☐ Inuit

If you have status, please provide First Nations Band information below:

Name of Band: _____ City: _____ Phone Number: _____

If you are Metis, do you have Metis Registration? _____

B. FINANCIAL SECTION

A. Request for IFSP Scholarship Funding

ELIGIBLE EXPENSE	YOUR TOTAL COSTS AND EXPENSES FOR THE YEAR	FUNDING RECEIVED FROM OTHER SOURCES (I.E. BAND)	***TOTAL SCHOLARSHIP FUNDING REQUESTED FROM FNFC***	COMMENT	***APPROVED AMOUNT***
LIVING ALLOWANCE					
TUITION					
BOOKS AND SUPPLIES					
FIELD TRIPS (School)					
FIELD GEAR (One time only)					
TRAVEL COSTS (Transit, moving)					
TOTAL REQUEST					

B. Eligible Scholarship Funding and Limits

ELIGIBLE EXPENSES	LIMITS	COMMENTS
LIVING ALLOWANCE	$1,000 PER MONTH FOR 8 MONTHS	If funding is available from other sources, top up to maximum total monthly allowance of $1,500 per month for 8 months. Eg. $800 from Band; FNFC will provide $700 per month.
TUITION/GRAD FEES	$5,075	
BOOKS / SUPPLIES / FIELD TRIPS	$800	
TRANSPORTATION (Bus)	$325	
FIELD GEAR (1st year only)	$550 one time only	If funding available from other sources top up to match to a maximum of $ 1,000 for field gear. Eg. ASET $1,000; FNFC $0 or ASET $300; FNFC $550
MOVING COSTS (if applicable)	$250	If moving costs not applicable can be used for books/supplies and field trips.

SCHOLARSHIP FUNDING APPROVAL AND CLIENT DECLARATION

MAILING INFORMATION

YOUR MAILING ADDRESS

CITY/PROVINCE	POSTAL CODE

CLIENT DECLARATION:

I am aware legal action may be taken against me for making false statements or failing to inform FNFC of changes to the information affecting my entitlement to sponsorship. I am aware that I may be disqualified from receiving sponsorship should I voluntarily exit the course, or not attend on a regular basis. I hereby declare that I acknowledge the terms and conditions set out in this contract and agree that in the event that I choose not to adhere to one or more of the following, I may be exempted from future funding:

1. Agree to attend and participate in classroom and practical sessions as designated by the institution I am attending for two semesters of training beginning September. I will also participate in the on-the-job training session through summer, with the Industry Partner.

2. I will complete all designated assignments, exams and/or research projects as defined by the Institution's curriculum in a professional manner.

3. Understand that non-professional behavior such as prolonged unexcused absences or disruption to a productive learning environment will result in my dismissal from the Program.

4. Will remain in contact with my FNFC workforce adviser on a monthly basis throughout the classroom portion of the Program to discuss how my studies are progressing and how they relate to work I may be doing during the on-the-job training period.

5. I am responsible for any costs incurred in excess of the agreed upon amount of sponsorship.

6. I am responsible to personally address any individual financial issues such as taxation, EI, etc.

7. The student indemnifies and saves harmless the FNFC and its employees and agents from any and all losses, claims, damages, actions, causes of action, costs and expenses that arise out of or occur, directly or indirectly, by reason of any negligent act or omission of the Student pursuant to this Agreement.

8. I agree that information, related to this initiative, may be shared amongst participating Provincial Ministries, Federal Departments, Industry Partners, ASETS, FNFC and public/private Training Institutions and identified as being a stakeholder.

9. I will report to the FNFC, as soon as possible, if there are changes to the information I have provided.

10. I certify that this information is true, correct and complete in every respect and I understand it may be subject to verification by FNFC or its representatives.

CLIENT SIGNATURE	DATE

Any funding under this agreement is solely dependent upon an appropriation of funds by First Nations Forestry Council from the appropriate funding sources.

OFFICE USE ONLY			
FILE NUMBER:	☐ APPROVED	☐ NOT APPROVED	☐ WITHDRAWN
CONDITIONAL APPROVAL, PENDING:			
AUTHORIZED SIGNATURE	DATE		

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