# SEVEN GENERATIONS EDUCATION INSTITUTE
# BISKAABIYANG BURSARY APPLICATION FORM
# FALL 2016

**Name of Post-Secondary Program Currently Registered In:**_____

**Campus:** ☐ **Fort Frances** ☐ **Manidoo Baawaatig (Kenora)**

**Student Number:** _____

**Year of Study:**_____

**Please check full or part time or apprenticeship and partnered institute:**

☐ Full-Time Program
☐ Part-Time Program
☐ Apprenticeship Program

Partnered Institute: ☐ Canadore College ☐ Lakehead University ☐ Sault College

## PERSONAL INFORMATION (please print)

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss

Last Name: First Name: Middle Initial:

Mailing Address: City: Postal Code:

Current Residence (if different from above): **SIN**:

**Phone #'s:**
Home: Work: Cell:

Email: Date of Birth(D/M/Y): Gender: M F

**Tribal/Linguistic/Cultural Affiliation**: ☐ Status Indian ☐ Non-Status Indian ☐ Métis ☐ Inuit

Band Name: Status Card#:

## REQUIREMENTS

**RECORD OF ACADEMIC SUCCESS & ATTENDANCE**

- If a university student, include a copy of your current university marks/transcript;
- If a college student the SGEI Registrar will have your midterm marks;
- SGEI Registrar will have your attendance report for university and college students

I hereby certify that the information provided on this application is accurate and complete. I understand that incomplete, inaccurate or false statements may cause my application to be rescinded. I understand that all application requirements to this bursary must be met before processing.

Signature of Student: _____ Date: _____

**Office Use Only:** Submitted:
Attendance ☐ Awarded: ☐ Amount Dispersed: _____ Date Disbursed: _____
Transcript ☐ Denied: ☐ Amount Dispersed: _____ Date Disbursed: _____
Application ☐
Comments: