

Tk'emlups te Secwepemc
Continuing Post-Secondary Application Form



DEADLINE April 30th ANNUALLY

1. Be sure to read the application carefully, answer each question and please sign this application.
2. All applicants must complete this application form fully and completely.
3. Please submit all forms directly to:

Post-Secondary Coordinator
Tk'emlups te Secwepemc
Education Department
200-300 Chief Alex Thomas Way
Kamloops BC V2H 1H1

4. If you have any questions, please contact:

Post-Secondary Education Coordinator
Jonathan Michel: (250) 828-2367 jonathan.michel@ttes.ca

Please ensure you have enclosed the following as only complete application packages will be considered for financial assistance.

I am a continuing student (funded the previous year) & have filled out this application and attached the TteS student self-evaluation form. I will submit my official transcripts as soon as they become available.



Tk'emlups te Secwepemc Post-Secondary Application

IDENTIFICATION OF STUDENT & DEPENDENTS

First Name:	Last Name:
Maiden Name:	Sex: Male / Female
Current Address: Street: City: Postal Code:	Phone/Cell Number:
Alternate Phone Number:	Email:

Marital Status:

Single	Married	Common Law	Divorced
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Additional Information on Dependents

Name:	Date of Birth:	Relationship:
Name:	Date of Birth:	Relationship:
Name:	Date of Birth:	Relationship:
Name:	Date of Birth:	Relationship:

Current Employment: Currently working:

Full-time	Part-time	Occasionally	Not employed	
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Program Information:

Name of Institution: _____		Length of Program Remaining: _____	
Name of Program: _____			
Start Date:		End Date:	
<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer
1) Cost of tuition (Sept to Apr) \$	2) Cost of Supplies \$	3) Cost of textbooks \$	



Declaration & Consent:

I hereby certify that the above information given in this form is true, exact and complete. I hereby authorize the Tk'emlúps te Secwépemc and the authorized persons to check if the information given is accurate. I understand that any false information given in this form or omission may lead to action against me and/or dismissal from the program.

I am aware that all the following documents are to be submitted before a cheque will be issued.

- Original Official transcripts from present or most recent academic program.
- Confirmation of enrollment as a full-time student that coincides with the timeline in your application to Ttes —fall and/or winter.
- Verification of enrollment/acceptance into the program.

I have read and understand the Guidelines that govern this application, the Post-Secondary Review Committee process & I have provided answers to all questions which apply to me. I hereby give consent to release my contact information to TteS sponsors, so that they may contact me personally. I hereby give consent to TteS Education Department to use/publish my name and relevant information to the TteS website, newsletter, for promotion, marketing, advertising, or in sponsor communications.

By Signing this also states that I have read and agree to the Tk'emlúps te Secwépemc Post-Secondary Education Policy and Procedure manual. I agree to abide by the Post-Secondary Policy & Procedures manual to ensure continued funding. I acknowledge and agree to my roles/responsibilities as a student set out in the PPM. As well as acknowledging and agreeing to the Post-Secondary Education Coordinator & Education Manager Roles and responsibilities set out in the PPM.

"Let us put our minds together and see what life we can make for our children". Sitting Bull

Applicant's Name (Please Print) Applicant Signature Date

Post-Secondary Education _____
Coordinator Date

Education Manager _____
Date

For Internal Use only

Date Received _____



Phone: 250.828.9721 Fax: 250.372.8833

200-330 Chief Alex Thomas Way
Kamloops, BC V2H 1H1

Toll Free: 1.855.828.9700

Authorization for Release of Information to Third Party

I, _____
(Student Name, please print clearly)

Authorize

(Educational Institute, e.g., Thompson Rivers University)

to release information regarding courses, registration, admission, attendance, progress and transcript of marks to the Tk'emlups te Secwépemc (TteS) Education Department.

This signed authorization will remain in effect until _____(date)
(Please date to the expected completion date of your program)

Student Signature

200-330 Chief Alex Thomas Way
Kamloops, BC V2H 1H1



Student Number

Tel: (250) 828-9721
Fax: (250) 828-8833
Toll Free: 1 (855) 828-9700

Request for Continued Education Assistance

Must be submitted to the Post-Secondary Education Coordinator after the completion of each semester.

Student Name request continued

funding to attend:

(Educational Institute)

I understand that continued funding is contingent upon availability of funds, my Official transcripts from each Semester, confirmation of registration in course(s) and/or program (i.e., Course Registration Data Form) and adherence to Tk'emlups te Secwépemc Post-Secondary Policy and Procedures.

Signature

Date

Student Number

Please indicate below any changes as per your application for education assistance submitted for the currently funded semester. (Please print clearly)

200-330 Chief Alex Thomas Way
Kamloops, BC V2H 1H1



Phone: (250) 828-
9721 Fax: (250)
372-8833
Toll Free: (855) 828-9700

Student Self-Evaluation Form

Name: _____ Semester: _____

Directions: Read each question carefully and thoughtfully. Think about the quality of your performance in your classes and what you have learned. Answer each question with integrity. Please answer each question fully or choose the most appropriate answer for the following questions:

1. This semester I got the grades I think I deserved.
 Agree Somewhat Agree Somewhat Disagree Disagree

2. I contributed my ideas in my class discussions, seminars, labs, etc.
 Agree Somewhat Agree Somewhat Disagree Disagree.

3. I asked questions during class.
 Agree Somewhat Agree Somewhat Disagree Disagree.
4. I made use of my professor's office hours to ask for help or address any questions I had.
 Agree Somewhat Agree Somewhat Disagree Disagree.
5. I was focused and well prepared this semester.
 Agree Somewhat Agree Somewhat Disagree Disagree
6. As my grades show, I put forth my best effort to attain the highest grades I could have.
 Agree Somewhat Agree Somewhat Disagree Disagree
7. I was often late or absent from classes.
 Agree Somewhat Agree Somewhat Disagree Disagree
8. I was often late when submitting or writing assignments, papers, exams, etc.
 Agree Somewhat Agree Somewhat Disagree Disagree
9. My grades were negatively affected this semester because of personal reasons.
 Agree Somewhat Agree Somewhat Disagree Disagree
10. I learned skills and knowledge that I can transfer into the "real world".
 Agree Somewhat Agree Somewhat Disagree Disagree

11. At least (3) specific things I have done this past semester to get the best grades possible are: (i.e., library, tutoring, etc.)

12. At least (3) specific things I would like to do next semester to ensure I get good grades are:

13. I would like the Tk'emlűps te Secwépemc Education Department to continue to fund my educational goals because: