### **Post-Secondary Continuing Application Checklist**

#### Dear Applicant,

Before your application form will be considered or approved for funding, all requested information on the application form must be provided. The items on this checklist must also be provided along with your application form. You can check off the required documents as you process your application to ensure your package is complete.

- \$5 Application Fee Required
- Letter of Acceptance and/or Confirmation of Registration from a Recognized or Accredited Public or Private Institution you will be attending.
- Fees Assessment schedule (which you will receive once you have registered in all your courses)
- Course Outline/Schedule (which states all courses you will be registered in).
  Program plans can also be submitted.
- o Official Transcripts from previous Post Secondary Institution Attended.
- Student to submit Waiver Form for Authorization of Release of Pertinent
  Information from the Post-Secondary Institution.
- For students wishing to claim dependent children, a photocopy of Provincial Heath Care Card.
- Photocopy of Treaty Status Card and/or Band Membership Card.

### Sponsorship Application Deadline Dates:

Fall Term (September) – **June 15**Winter Term (January) – **November 15** 

Spring Term (May/June) – March 15 (third & fourth year students)

Summer Term (July/August) - May 30 (third & fourth year students)



# ERIMINESKIN EDUCATION

BOX 219, MASKWACIS, ALBERTA TOC 1NO (780) 585-4006, 585-4007 TOLL FREE 1-800-585-3941 FAX (780) 585-2006

## AUTHORIZATION FOR RELEASE OF INFORMATION

(Name of Educational Institution)	James (1974) deleter menter (1975) deleter menter septemble (1975) (1975)
I,Of(Address)	TOTAL F CONTINUES AND
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authorize the release of any academic information concerning me to ERMINESKIN EDUCATION.	
The information to which the ERMINESKIN EDUCATION is authorized to obtain includes, but is not limfollowing:	nited to, the
1. Official transcipts of my grades;	
2. My attendance records;	
3. Random progress updates;	
4. Details to my course of study including specific courses being taken and class schedules	,
5. Information as to my current address and any changes;	
6. Copies of any notices, advice or direction regarding my ongoing status as a student.	
(Name of Educational Institution)	t any time.
This consent may not be withdrawn by me for so long as I remain enrolled as a student at	
. (Name of Educational Institution)	
Clarech use of A and Use and	
Signature of Applicant Date	
Witness Name (print)	