



Post Secondary Funding Application Package 2026-2027

Student Name: _____

Address: _____

Status No. _____

Email Address: _____

Telephone/Cell: _____

Check List	Yes	No
Student Funding Contract		
Application Form		
Sponsoring Agency Approval Form		
Photocopy of Status Card		
Letter of Student's Goals & Objectives – include the name of the Program, what will you acquire (example, Degree, Diploma), the Institution name and contact, tuition and text book costs and the length of the program, start and end dates.		
Student's Resume		
Current Transcripts		
Letter of Acceptance to Program – Proof of Registration for Continuing Students		
Time Table		
Budget Availability		



Application for Educational Assistance 2026-2027

Program	Institution	Location	Start/End Dates

Program/Course Information

Education Program _____ Institution _____ Full Time _____ Part Time _____ Previous Training Months Used _____ Training months for 2025-2026 _____ Graduation Date _____ Start Date _____ Stop Date _____	☐ U.C.E.P. ☐ General Studies ☐ Certificate Program ☐ Diploma Program ☐ Degree Program ~ B.A. ☐ Graduate Degree ~ Masters ☐ Graduate Degree ~ Doctorate
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Do Not Write In This Area

Tuition	
Texts & Supplies	
Total Fees	
Living Allowance	
Total Budget	

Funding Level Confirmed ☐ Level 1 ☐ Level 2 ☐ Level 3

Recommended – Education Manager Signature & Date _____



**Student Funding Contract
COMMITMENT
&
STUDENT AUTHORIZATION 2026-2027**

Student Name: _____
Program: _____
Institution: _____
Location: _____
Term/Semester _____

Student Commitment

I, _____ do hereby agree to attend the above listed institution for the mentioned terms/semesters and, in doing so, agree to the following terms and conditions. I will:

1. Attend a minimum of 95% of all scheduled classes;
2. Submit monthly renewal declarations by mid month for the duration of each term or course;
3. Inform the Leq'a:mel Education Manager of any changes that affect my program or funding;
4. Complete all assignments scheduled per instructor;
5. Achieve at least a C+ grade in all classes to the best of my ability;
6. Submit to Leq'a:mel Education Manager a statement of grades at the end of each term, and Official Transcripts after the semester is completed each year.

I accept full responsibility to abide by the above terms/conditions, and realize that failure to do so will jeopardize continued funding delivery for the program of studies.

Student Authorization

I agree to the release of information by the institution to the Leq'a:mel Education Manager regarding my transcripts, attendance, progress or effort, at their request.

Student Signature

Date

Education Manager Signature

Date