

SECTION 1 - PERSONAL INFORMATION (cont'd)

Gender: Female Male Date of Birth: |_____| |_____| |_____|
Year Month Day

Place of Birth: |_____| |_____| |_____|
City Territory/Province/State Country

Canadian Resident, from: |_____| |_____| (do not leave blank) If born in Canada put year and month of birth
Year Month

Yukon Resident, from: |_____| |_____| to |_____| |_____| If you have ever left the Yukon for more than 12months
Year Month Year Month enter your most recent return date

I am not a Yukon Resident: (but I have one parent that lives in Yukon - this parent must complete Section 8)

At the time of this application I am: Single Single Parent Married Common Law
(living together 1 year or more)

At the time of this application I am: Canadian Citizen
 Landed Immigrant (Copy of Confirmation of Permanent Residence must be attached)

Optional for Statistical Purposes Only: The information is used to improve Advanced Education Programs and Services.

Aboriginal people are persons in Canada who consider themselves to be Status, Non-Status, Inuit, Metis and/or a Beneficiary.

Do you consider yourself to be an aboriginal person? Yes No

If YES, please mark the applicable box: Status Non-Status

Are you a citizen of a Self Governing First Nation? Yes No

If YES, please indicate which First Nation: |_____|

Do you consider yourself as having a disability? Yes No

Do you consider yourself a member of a visible minority group? Yes No

SECTION 2 - RESIDENCY INFORMATION

Give a complete breakdown of where you were physically living for the 2 years immediately prior to the start of your classes for this academic year. Show separately the periods you were in school and not in school (include short periods of time in Yukon i.e. Christmas)

From		To		City	Territory/Province/State	Country	I was in School		
Year	Month	Year	Month				Ftime	Ptime	No
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3 - PROGRAM INFORMATION FOR THIS SCHOOL YEAR

Name of Institution: _____

Campus, if applicable: _____

City Prov/Terr/State

Student Identification Number: _____

Name of Program: _____
(i.e. Science, Geography, Engineering, Upgrading, etc.)

What type of program are you taking:

- Upgrading/College Preparation
- Certificate (normally 1 year duration)
- Diploma (normally 2 year duration)
- Under-graduate degree (normally 4 year duration)
- Masters/Graduate
- Doctorate

How many years is your program (i.e. 1, 2, 3, 4 or a 5 year duration)

Which current year of the program are you entering (not the # of years you have already taken) (i.e. 1st year of a 2,3 or 4 year program)

How is your program divided:

- Quarters (3 months)
- Semesters (4 months)
- Other, explain _____

For this school year my classes start on: _____ and finish on: _____
Year Month Day Year Month Day (include exam dates)

Are you taking this program by correspondence? Yes No

Is part of your program a co-op/work/practicum term? Yes No

Co-op/Work/Practicum Dates: From: _____ To: _____
Year Month Year Month

SECTION 4 - SPONSORING AGENCY FUNDING

Have you applied or will you be applying for funding from another agency to assist with education costs? Yes No
(EI, CEC, DIA, First Nations {provide name of Band}, Federal/Provincial/Territorial Govts., Military, other provinces, etc.)

Name of Sponsoring Agency: _____

(check each box that applies and the amount you have requested, will receive or will be paid for you)

Tuition & Fees: \$ _____ Books: \$ _____ Living Expenses: \$ _____ Transport: \$ _____

Other Specify: _____ \$ _____

SECTION 5 - STUDENT TRAINING ALLOWANCE

THE DEADLINE FOR RECEIPT OF YOUR COMPLETE STUDENT TRAINING ALLOWANCE APPLICATION IS 14 SCHOOL DAYS AFTER THE START OF YOUR CLASSES.

Application or required documents received after the deadline date will be approved from the date your application becomes complete.

- You must be attending Yukon College or a designated 'Approved Human Resource Development Training Program' within the Yukon.
- You must be attending full-time.
- You must be attending for a minimum of 3 consecutive weeks.
- If you are in receipt of funding from another funding agency or employer for education/training purposes you may be ineligible for Student Training Allowance. If you are unsure, please contact our office.
- Cheques for Student Training Allowance are picked up at the Yukon College bookstore and community campuses for Yukon College students or at your training institution if you are attending an approved designated program.
- Will you have to move to another community to attend your program? Yes No
- If yes, will you have to maintain two residences while attending school? Yes No

DOCUMENTS REQUIRED
(must be submitted within the deadline explained above)

- * Letter of Acceptance or proof of registration from Yukon College or the training institution within Yukon. Attached On its way

DEPENDENTS

If you have dependent(s) living with you please complete the following:

Definition of Dependent(s) -a child natural, adopted or stepchild under the age of 18 and/or
 -a spouse whose income is less than \$88 per week

Name of Dependent(s) (Last Name, First Name)	Age	Relationship to You	Lives with You		Shared Custody		Attending Post Secondary	
			Yes	No	Yes	No	Yes	No
_____	____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If shared Custody, when do your dependent(s) live with you? _____

SECTION 6 - YUKON GRANT (Students attending any designated institution)

THE DEADLINE FOR RECEIPT OF YOUR COMPLETE YUKON GRANT APPLICATION IS 6 WEEKS AFTER THE START DATE OF YOUR CLASSES.

If we receive your application or required documents after the deadline date, you will not be eligible for funding for the current semester. However, funding for subsequent semesters will be considered.

- You must be attending full-time post-secondary studies.
- You must be attending for a minimum of 12 consecutive weeks.
- If you are in receipt of funding for educational purposes from other Territorial or Federal agencies other than special scholarships, awards, or loans you are not eligible for Yukon Grant.
- Dependent student (18 years of age and younger) or
New Resident student (18 years of age and younger, with 1 year of high school in the Yukon and 1 year of Yukon residency together with a parent or legal guardian).
One parent must complete Section 8.
- Cheques for Yukon Grant are issued in your name and sent to you care of the Financial Aid Office of the post-secondary institution you are attending.

TUITION & COMPULSORY FEES

What are your tuition & compulsory fees for this academic year? (If you don't know actual cost give an estimate)

\$ _____ | Cdn Dollars (DO NOT INCLUDE books or residence fees)

DOCUMENTS REQUIRED

(must be submitted within the deadline explained above)

If this is your FIRST Yukon Grant Application:

- * Letter of Acceptance Attached On its way
- * High School Transcript/Permanent Record Card Attached On its way

If you are applying as a Dependent Student as per above definition one parent must complete Section 8.

If this is your SUBSEQUENT (2nd or more) Yukon Grant Application:

- * Official Transcript from the institution you last attended full time Attached On its way
(Must bear an original seal and signature from the registrar's office
COPIES OR FAXES ARE NOT ACCEPTED)
- * If you are changing Institutions a new Letter of Acceptance Attached On its way N/A

If you are applying as a Dependent Student as per above definition one parent must complete Section 8.

SECTION 7 - YUKON EXCELLENCE AWARDS

If you have been informed that you are eligible for a Yukon Excellence Award for high scholastic achievement in a Yukon Territorial or Departmental examination you must:

- Meet the Yukon Grant Eligibility Criteria in order to redeem your Awards. Refer to the Student Financial Assistance Brochure or visit our web site www.education.gov.yk.ca for this information.
- Dependent student (18 years of age and younger) or
New Resident student (18 years of age and younger, with 1 year of high school in the Yukon and 1 year of Yukon residency together with a parent or legal guardian).
One parent must complete Section 8.
- There is no deadline date for Yukon Excellence Awards.

EDUCATION HISTORY: Date you left High School: |_____|_____| Name of Yukon High School: |_____|_____|
Year Month

If you wish to apply your award to this academic year, please choose one of the following options:

OPTION A - REIMBURSEMENT

I would like to apply \$ _____ | of my excellence awards for this academic year.

DOCUMENTS REQUIRED FOR REIMBURSEMENT OPTION

* Proof of payment or receipts for tuition/compulsory fees and/or books are: Attached On its way

If you have not paid your eligible costs yet, you may forward these receipts at a later date. If you have paid your eligible costs and do not have receipts, contact the admissions department of your educational institution to obtain copies.

Cheques for Yukon Excellence Awards are issued in your name and sent to you care of the Financial Aid Office of your post-secondary institution.

OPTION B - DIRECT PAYMENT OF TUITION/FEES TO INSTITUTION (INVOICE REQUIRED)

It is your responsibility to check and see if your institution will allow this option.

You must request your institution invoice our department directly to:

Student Financial Assistance, Department of Education
Government of Yukon
Box 2703, Whitehorse, YT Y1A 2C6.

The invoice can only reflect tuition/compulsory fees and/or book costs and cannot exceed the maximum of your request or available awards. If you are unsure of the total amount of award(s) available to you, please contact our office.

I would like to apply \$ _____ | to be invoiced to the Student Financial Assistance Office.

DOCUMENTS REQUIRED FOR DIRECT PAYMENT OPTION

* Invoice from the institution is: Attached On its way

A cheque will be issued to your post-secondary institution for payment of invoice.

SECTION 8 - PARENT/LEGAL GUARDIAN INFORMATION (for dependent students 18 years & younger)

If you are applying for a Yukon Grant or Yukon Excellence Awards as a:

- Dependent student (18 years of age and younger) or
- New Resident student (18 years of age and younger, with 1 year of high school in the Yukon and 1 year of Yukon residency together with a parent or legal guardian)

Your parent or legal guardian must complete the following:

Last Name: _____ Given Name: _____

Permanent Mailing Address: _____
Address

Extra line for address

City Prov/Terr/State

Country Postal Code / Zip Code

(_____) _____
Telephone

Citizenship Status: Canadian Citizen Landed Immigrant
If you have indicated that you are a landed immigrant, please provide a copy of your permanent residence status documents.

Student's Relationship to you: _____

Give a complete breakdown of where you were physically living for the 2 years immediately prior to the start of your dependent's classes for this academic year. For example, if your child is starting this September indicate where you were living during the 24 months before September.

From Year	Month	To Year	Month	City	Territory/Province/State
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Yukon Resident From: From: _____ To: _____ If you have ever left the Yukon for more than 12 consecutive months put in your most recent return date.
Year Month Year Month

I make this declaration conscientiously believing that the information above is true and correct. I understand that false or misleading information constitutes an offence pursuant to the provisions of the Criminal Code of Canada.

Signature: _____ Date: _____
Year Month Day

SECTION 9 - SCHOLARSHIPS

Scholarships, which are administered solely through the Department of Education, are indicated below. More information on these scholarships is available from our booklet, 'Scholarships Available to Yukon Students' or through our website at www.education.gov.yk.ca

If you are applying for scholarships from our booklet other than the ones indicated below, you must write directly to the donor. Applications may or may not be necessary. Please refer to the scholarship booklet or our website for more information.

Contact the Student Financial Assistance Unit if you are unsure and/or require applications or brochures.

For the following scholarships:

- **Deadline for receipt of completed scholarship application is August 31st.**
- **Scholarships are normally awarded to the student with the HIGHEST MARKS. Type of program and institution may also be considered.**

I am applying for: (check appropriate boxes that apply to you)

- Canadian Army Yukon Scholarship - \$100.00
Criteria: - Grade 12 student from the Yukon Territory entering 1st year of post-secondary
- Minimum Grade 12 average of 60%
- Accepted into an eligible institution
Provide: - Official Grade 12 transcript
Selection: - Highest marks
- Vancouver Yukoners' Association Scholarship Fund - \$1,000.00
Criteria: - Yukon resident student attending a post-secondary institution for a second or subsequent year.
Provide: - Official Transcript
- A brief outline of your Yukon background and schooling to date
Selection: - Highest marks
Note: You can only receive this scholarship once.
- Nicholas John Harach Scholarship - \$100.00
Criteria: - Yukon student entering any year of post-secondary
- Aviation oriented technical training
Provide: - Official Transcript
Selection: - Highest marks
- Yukon Art Society Scholarship - \$250.00
Criteria: - Yukon secondary school student entering first year level Visual Arts, accepted into a post-secondary Institution.
Provide: - Letter of recommendation from art teacher or school principal
- Final grade 12 transcript
Selection: - Highest marks
- Yukon Huskys C.B. Radio Club Scholarship - \$350.00
Criteria: - Yukon Student entering any year of post-secondary
- Enrolled in a technical program (preferably)
Provide: - Official transcript
Selection: - Highest marks

IMPORTANT – READ CAREFULLY AND SIGN IN INK

This information is being collected under the authority of the *Yukon Student Financial Assistance Act* and *Canada Student Loans Act* and respective regulations for the purpose of administering territorial, federal or other student loan and grant programs. This would include determining eligibility, sharing information with other agencies as required and establishing related databases. For further information please contact or direct inquiries to the Student Financial Services Officer at (867) 667-5929 or visit our office at the Education Building, 1000 Lewes Blvd., Whitehorse, Yukon.

I hereby authorize Human Resources Development Canada to release information to the Student Financial Assistance Unit about my Employment Insurance Claim, employment related issues and/or training related income support that I may be receiving.

I also hereby authorize agencies, government departments, institution's financial aid/fees/registrar's/student accounts offices to which I am attending full time, to release information relating to this application and the funding for which I have applied.

I agree that information pertaining to this application may also be shared with other funding agencies relating to this application and the funding for which I have applied, and potential employers (employers would receive your name, mailing address and information pertinent to the job only).

I make this declaration conscientiously believing that the information above is true and correct, and knowing that it is of the same force and effect as if made under oath. I understand that false or misleading information in relation to this application constitutes an offence pursuant to the provisions of the *Criminal Code of Canada*.

Date |_____| |_____| |_____| Signature: |_____||
 Year Month Day

Print Name: |_____||

IMPORTANT

If you are attending post-secondary education outside of Yukon you must inform the Yukon Health Care Insurance office that you are temporarily leaving the Yukon for educational purposes to receive continued health care coverage. A temporary absence form is on the following pages for your convenience. Fill out and leave attached to application form.

IMPORTANT

STUDENTS ATTENDING POST-SECONDARY EDUCATION OUTSIDE OF YUKON

Re: Yukon Health Care Coverage - Attending Educational Institutions Outside the Territory

If you are planning to further your education outside of the Yukon you remain eligible for physician and hospital benefits under the Yukon Health Care Insurance Plan and Hospital Insurance Services Plan.

To continue to receive physician and hospital health care coverage while out of the territory you must:

- be in full time attendance at a university or other recognized educational institution;
- intend to return to the Yukon Territory permanently upon completion of your studies;
- submit a "Temporary Absence" form for approval prior to your original date of departure and for each year you are absent, (policy is currently under review);
- submit a "Letter of Explanation" if you do not plan to, or cannot, return home at least once per year; (policy is currently under review);
- contact the Health Services Branch upon your return to the Yukon - failure to do so may result in the cancellation of your health care coverage.

However, there are limitations to your coverage. Your benefits under the Travel for Medical Treatment Program cease on the day you leave the territory (including ambulance services). If you are registered on the Chronic Disease Program you may be reimbursed for the cost of drugs when you submit original paid receipts upon returning to the territory if you have maintained your Yukon health care coverage for the duration of your absence.

We strongly advise that you purchase additional Health Care Insurance while out of the Yukon.

ATTENDING EDUCATIONAL INSTITUTIONS IN CANADA

Regardless of the province or territory in which you attend school, insured hospital and physician services are 100% covered. If you see a physician or are hospitalized, the bills for your expenses will be charged back to the Yukon for payment under the terms of the Inter-provincial Reciprocal Billing Agreement. (Note: Quebec is not part of the Inter-Provincial Reciprocal Billing Agreement and physicians/hospitals may want payment at the time the service is provided. These expenses will be reimbursed to you on submission of paid receipts.) You are responsible for any service or treatment received that is not insured under the Yukon Health Care Insurance Plan.

ATTENDING EDUCATIONAL INSTITUTIONS OUTSIDE OF CANADA

Coverage of insured hospital and physician's services is limited to the maximum amount that would be paid to receive that same service in the Yukon. Most out of country health care providers will require that payment be made at the time services are provided. Reimbursement is issued by Yukon Health Care Insurance on receipt of paid invoices. You are 100% responsible for any costs over the Yukon rate and for any service or treatment received that is not insured under the Yukon Health Care Insurance Plan.

Yukon Health Care Insurance Plan, P.O. Box 2703, Whitehorse, Yukon Y1A 2C6
Phone: (867) 667-5209 Fax (867) 393-6486



**TEMPORARY
ABSENCE FORM**
Box 2703
Whitehorse, Yukon
Y1A 2C6

Information is being collected under the authority of the *Health Care Insurance Plan Act* for the purpose of determining program eligibility. Queries should be directed to Registration at 667-5209 or toll free 1-800-661-0408, or in writing at H-2, Box 2703, Whitehorse, Yukon Y1A 2C6.

YHCIP no. _____ Leave date _____

Return date _____

Name _____ Yukon address _____

Reason for absence _____ Yukon telephone no. _____

_____ Temporary address _____

Signature _____

Received by _____ Entered _____

MUST HAVE A YUKON ADDRESS AND RETURN DATE

RETURN FROM TEMPORARY ABSENCE

Date Returned _____ Change of address _____

Signature _____

Received by _____ Entered _____