

# Hagwilget First Nation Government

## POST-SECONDARY STUDENT REQUEST FOR SUPPORT

REQUEST FOR ADDITIONAL SUPPORT FUNDING  
HFNG EDUCATION DIVISION  
FORM HFNG\_ED\_1.4

Student's name: \_\_\_\_\_

Course of study: \_\_\_\_\_

Year (1/2/3/4): \_\_\_\_\_

Institution: \_\_\_\_\_

Payee's name: \_\_\_\_\_

Company name (if applicable): \_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

		Estimated Cost
Tutoring support	<input type="checkbox"/>	_____
Health & Wellness support	<input type="checkbox"/>	_____
Graduation support	<input type="checkbox"/>	_____
Additional travel required by studies	<input type="checkbox"/>	_____
Other *	<input type="checkbox"/>	_____

\*Please specify.

\_\_\_\_\_

\_\_\_\_\_

Please contact the Education Division (250-842-6258 Extn.204) if financial hardship creates a barrier to your accessing required post-secondary programs or courses.

### By signing below, I acknowledge the following:

- I request that the Hagwilget First Nation Government provide the above support funding.
- I confirm that the above support services will enable me to continue or complete my studies.
- I confirm that I will provide documentation of support services received promptly, upon request.

\_\_\_\_\_

Date \_\_\_\_\_

*Student signature*

Please submit to HFNG by:

Mail: Hagwilget First Nation Government, c/o Education Division, P.O. Box 460, New Hazelton, BC V0J 2J0

FAX: 250-842-6924 or e-mail: [education@hagwilget.com](mailto:education@hagwilget.com)