MATAWA POST-SECONDARY

STUDENT APPLICATION PACKAGE

Matawa Post-Secondary (MPS) Program provides post-secondary assistance on behalf of the following First Nations: Aroland, Ginoogaming, Long Lake #58, Neskantaga, and Webequie. MPS provides financial assistance to eligible students towards the cost of their post-secondary education.

ALL STUDENTS continuing and new, are required to submit a new application each term, according to the following deadlines:

DEADLINE DATES FOR APPLICATIONS

May 15th	Fall Term	September to December
May 15th	Fall & Winter Terms	September to April
November 1st	Winter Term	January to April
March 31st	Spring & Summer Terms	May to August

APPLICATION PROCEDURES

To process your application, please read the following and send required documents and completed application to the MPS office by the deadline dates.

Unless otherwise noted, please send ***original copies only*** – screen shots will not be accepted

- Application Form (completed and signed)
- Education Plan (2 pages)
- Student Rights and Responsibilities Form (completed and signed)
- Consent to Request & Release Information Form (completed and signed)
- Affirmation of Tuition, Residence, and Meal Plan Costs (completed and signed)
- Copy of status card – Front and back
- Banking information – Void Cheque/Direct Deposit Form from your bank
- Letter of Acceptance from a College/University with course/program outline

200 Lillie St. N. | Thunder Bay, ON P7C 5Y2 | T: 807-768-3300 | TF: 1-888-283-9747 | F: 807-768-3301 | matawaeducation.com/matawa-post-secondary

Additional information required and may be submitted after the deadline but preferably attached to the application.

- Secondary School Transcript
- Evidence of satisfactory completion of last MPS sponsored course(s)/program
- Tuition fee statement
- **RESIDENCE/MEAL PLAN** – If you plan to stay in residence, please send a written request to the MPS office with a copy of your residence and meal plan agreement. Contact the MPS office for the maximum allowable rates. ***Please note that students who stay in residence will not receive a monthly living allowance***
- **MODULAR** students only – Contact the MPS office for more information about modular requirements and allowable rates
- **PRIVATE SCHOOLS** – Contact the MPS office to find out if your school is eligible
- **DEPENDANT INFORMATION** – If you are claiming a dependant(s) please attach a copy of child(ren) status card or health card. Up to 18 years of age if attending school.

Any missing documents may either delay the process of your application or cause you to miss the deadline dates. ***It is the applicants' responsibility to contact the MPS office to ensure application and information have been received.*** If you are having problems with completing or accessing any of the required documents, please contact the MPS office.

Should you require a copy of the MPS Policy please contact the MPS office staff.

The MPS Advisory Board will meet ***two weeks after each deadline date*** to review the applications. All students will be advised if they have been approved or not within two weeks ***after*** the MPS student funding selection meeting.

TO APPLY

- Submit online at: matawapse.dadavan.com/student/pseapplication.jsp
- Scan and e-mail to: postsecondary@matawaeducation.ca
- Scan and fax to: 1 (807) 768-3301
- Mail to: **Matawa Post-Secondary Program**
  200 Lillie Street N.
  Thunder Bay, Ontario.
  P7C 5Y2

Matawa EDUCATION

Matawa POST SECONDARY PROGRAM

APPLICATION FORM

Last Name			First Name
10-Digit Band Number (status card)	First Nation		Application Date
Gender M [ ] F [ ] X [ ]	Preferred pronouns	Reserve Residence ON[ ] OFF [ ]	Have you resided in Canada for the last 12 months? YES [ ] NO [ ]
Date of Birth	Student Number		S.I.N.
Email:			

Permanent Address Street/PO Box: City: Postal Code:	**Address While at School** Street/PO Box: City: Postal Code:
Home Phone	Cell Phone
Emergency Contact Name	Emergency Contact Phone Number
Are you... Single [ ] Single Parent [ ] Married [ ] Common-Law [ ]	
Spouse Full Name	Is your spouse... Employed [ ] Unemployed [ ]
Child Name: Date of Birth:	Child Name: Date of Birth:
Child Name: Date of Birth:	Child Name: Date of Birth:

I declare that all the above information is complete, true and accurate. I agree to inform Matawa Post-Secondary of any changes which may affect my eligibility for allowance. I also declare that I have read and understood all definitions, rules, and guidelines of this application.

Student Signature **Date**

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EDUCATION PLAN

Fall/Winter [ ] Spring/Summer [ ] Winter Term [ ] Summer Term [ ]			
Full Time [ ] Part Time [ ] Modular [ ]			
In-person [ ] Hybrid [ ] Online [ ]			
College Certificate [ ] Diploma [ ]	**University** Bachelor's Degree [ ] Honours Bachelor Degree [ ]	**Graduate Studies** Master's Degree [ ] Doctorate Degree [ ]	
Program Course Name	Educational Institute	Institute Address/City	
Duration of Program (# of years) 1 2 3 4 5	Current Year of Study (year you are in) 1 2 3 4 5	Academic Period for this Application (M/D/Y – M/D/Y)	Expected Date of Graduation (M/Y)
High School Graduate? Yes [ ] No [ ]	Last year in high school	High School Name	
Will you be living on-campus? YES [ ] NO [ ]	Does your residence require a meal plan? YES [ ] NO [ ]		
Did you have an Individualized Education Plan (IEP) in high school? YES [ ] NO [ ]			

1. Do you have previous post-secondary education or training? (if applicable)

Institute	Program	Dates Attended	Funded By	Completed

EDUCATION PLAN CONTINUED

2. What are your career goals? Why have you chosen this field?

3. Describe your plan for completing the program (Example: number of courses per semester and total length of the program).

4. Do you plan on continuing your education beyond this program? If yes, please describe in detail your long-term education plan.

STUDENT RIGHTS AND RESPONSIBILITIES

STUDENT RIGHTS

Each student has the right:

- To the privacy of information
- To be informed of Post-Secondary Student Support Program policies and procedures
- To be treated respectfully by MPS staff
- To discuss extenuating academic circumstances without fear of reprisal
- To have any post-secondary issues resolved in a fair, equitable, and timely manner
- To file a complaint or appeal without fear of reprisal

STUDENT RESPONSIBILITIES

It is the student's responsibility:

- To be informed of MPS policies, changes, and procedures
- To comply with MPS policies and procedures
- To treat program staff, faculty, staff, and students with respect
- To provide program/course documentation on schedule throughout the academic year. This includes semester timetables, mid-term marks, final grades, and transcripts.
- To complete all course work on schedule as assigned by the post-secondary institution
- To attend all required classes and tutorials
- To arrive of time to class and remain for the duration of the lesson/tutorial
- To maintain a minimum 2.0 Grade Point Average (GPA)
- To contact MPS staff and check-in once every two weeks via phone, email, text, or voicemail
- To consult with MPS staff prior to withdrawal from a course/program
- To keep MPS staff informed of any changes to: bank information, email address, mailing address, contact number
- To not enter the Matawa Education Department building under the influence of alcohol/illicit drugs

I, _____ (print name), have read and understand my rights and responsibilities as a sponsored student with Matawa Post-Secondary.

Student Signature	**Date**
MPS Staff Signature	**Date**

CONSENT TO REQUEST AND RELEASE INFORMATION

Last Name	First Name	Middle Name
Student Number	Date of Birth	
Educational Institute	Institute Address/City	

MODULAR STUDENT Please provide a letter from your employer stating what type of financial support they are providing to you while in attendance with your modular program (Example: travel, accommodations, meals, other).

CONSENT TO REQUEST INFORMATION I, _____ provide my consent, as required by Matawa Post- Secondary Policy, to allow the MPS office to request copies of information from employers, institutions and other funding agencies. This consent is intended to allow staff to verify information to determine my eligibility to receive Education Assistance.

CONSENT TO RELEASE INFORMATION I, _____ provide consent, as required by the Matawa Post-Secondary Policy, to allow the MPS office to release information and provide copies of documentation to employers, institutions and other funding agencies. This consent is intended to allow staff to provide information so that my eligibility for assistance may be determined.

SIGNATURES This signed consent is valid until _____, 20_____.

Student Signature **Date**

COMMON LAW / MARRIED APPLICANTS I, _____ am the partner of _____. I have read and understood this document and by this authorization I provide my consent, as required by the Matawa Post-Secondary Policy, to allow Matawa Post-Secondary Staff to request and release information about myself to government agencies to determine my partner's eligibility to receive Educational Assistance.

Signature of Partner **Date**

AFFIRMATION OF TUITION, RESIDENCE, AND MEAL PLAN COSTS

AFFIRMATION OF UNDERSTANDING

I, _____, confirm to MPS that I have knowledge of the following:

- All tuition costs for the applied term(s)
- All residence/dorm costs for the applied term(s)
- Confirm that I am submitting the correct cost of tuition, residence, and meal plan for the applied term(s)

I, _____, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of tuition, outside of approved amounts, that are provided when my application is processed for the applied term(s).

I, _____, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of residence, outside of approved amounts, that are provided when my application is processed for the applied term(s).

I, _____, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of meal plans, outside of approved amounts, that are provided when my application is processed for the applied term(s).

Student Signature	**Date**
MPS Staff Signature	**Date**