

Student Check List

STUDENT NAME: _____ TREATY # _____

INSTITUTE: _____ STUDENT ID# _____

LOCATION ATTENDING: _____

In order to complete your funding application we need the following pieces of information to be submitted to our office as soon as possible;

- _____ MLCN PSSSP Application form for funding.
- _____ A copy of your treaty/status card (front & back)
- _____ A copy of your hospitalization card for yourself and all your dependents.
- _____ A copy of your Child Tax Benefit outlining all your dependents.
- _____ A copy of your official transcripts from all previous institutions attended.
- _____ An official copy of your Grade 12 transcripts
- _____ A letter of acceptance from the institution you applied to.
- _____ A class registration (12 credit hours) from the institution
- _____ Student Contract to be signed
- _____ Other
- _____
- _____
- _____
- _____
- _____
- _____
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- _____
- _____
- _____

Academic year; _____