



First Citizens Fund

Student Bursary Application 2024-25 Academic Year

Program Description

The First Citizens Fund Student Bursary Program provides financial awards to Indigenous students enrolled in post-secondary education. Bursaries between \$700-\$1,200 are awarded to students who meet all eligibility requirements and who demonstrate significant financial need.

The Province of British Columbia funds the First Citizens Fund Student Bursary Program while the BC Association of Aboriginal Friendship Centres administers it. Both parties are honored to support Indigenous students in pursuing educational opportunities at the post-secondary level.

Applicants must meet all of the following eligibility requirements:

- i. Post-secondary students of Indigenous ancestry (status, non-status, Métis, Inuit) who are:
 - a. Permanent residents of British Columbia
 - b. Registered in a BC recognized post-secondary institution
 - c. Have a minimum GPA of 2.5 or a C+ grade equivalent

Please note: students are not eligible to receive a bursary to repeat a course or academic year.



Application Process

Applications must be completed and submitted to the Education Coordinator by 5:00 PM on the application deadline. Students must submit a new application for each semester. The application process requires:

- i. A complete application form signed and dated.
- ii. All supporting documents as listed in the Application Checklist.
- iii. Please scan and submit your application and supporting documents into one PDF file. If you are unable to do this, please clearly label each document as listed in the checklist and submit in either Word or PDF format.
- iv. If you are a successful candidate, your funding is contingent upon submission of:
 - a. Official transcripts for your most recent semester.
 - b. Proof of registration for the courses you are taking in the upcoming semester.

Incomplete applications will not be considered.

Application Deadline

September 15th, 2024

for students applying for the Summer semester (May-August 2024)

January 15th, 2025

for students applying for the Fall semester (September-December 2024)

May 15th, 2025

for students applying for the Winter semester (January-April 2025)

Contact Information

Please forward all applications, correspondence, inquiries, and official transcripts to:

BC Association of Aboriginal Friendship Centres: Education
551 Chatham Street
Victoria, BC V8T 1E1

Email: education@bcaafc.com

Phone: (250) 940-4901

Please forward applications digitally if possible. If you are not able to submit them digitally, mail them as soon as possible and account for mailing times.



Application Checklist

- Application Checklist** – Completed and signed.
- Application Form** – Completed and signed.
- Budget** – (Section **E** of application form) Including all expenses and sources of income for the academic year.
- A copy of your Status Card** (if applicable) – Front and back.
If you are non-status, you must provide a copy of your birth certificate and a copy of your parent(s) status card, or other supporting evidence/ documentation of Indigenous ancestry. If you have questions, please contact the Education Coordinator at BCAAFC.
- Proof of Registration** – From the post-secondary institution that you attend.
- Cost of tuition, Books, and Fees** – Provide documentation from the post-secondary institution that clearly states approximate tuition and fees for your program of study for the semester that you are applying for.
- Most Recent Grades/Transcripts** – You can submit unofficial transcripts/ grades with your application, but successful candidates must submit their official transcripts before receiving their funds.
- A Letter of Recommendation from a recognized Indigenous organization** – A letter speaking to your character, community involvement, or otherwise supporting your FCF application.
- A Personal Letter** – Self-written letter on family background, ancestry, education and employment history, and career and personal goals.
- For applicants completing graduate studies** – If you do not have transcripts, please submit a letter from your supervisor confirming that you are demonstrating satisfactory progress in your program.

Please note: applicants may be asked to provide additional supporting information at the discretion of the BC Association of Aboriginal Friendship Centres.

Printed Name

Date

Student Signature



A. Eligibility Requirements

This funding is intended for Indigenous students who are registered in a BC post-secondary institution and who demonstrate significant financial need.

Name

Aboriginal Ancestry: Status Non-status
 Inuit Métis

Registry # (if applicable)

Name of Band, First Nation affiliation, Métis local, land claim, etc.

Are you a BC resident? Yes No

How long have you resided in BC for? _____

Applicant type: New
 Continuing (funded by FCF for the previous semester)
 Returning (funded by FCF in previous years)

What semester are you requesting funding for? (Select One)

Summer 2024 (May-August)
 Fall 2025 (September-December)
 Winter 2025 (January-April)



B. Applicant Information

Social Insurance Number (SIN)

Gender

Birthdate

Mailing address

Town

Province

Postal Code

Telephone

E-mail

C. Program Information

Name of post-secondary institution

Program of study

Type of student: Full-time Part-time

How many classes did you complete this semester? _____

City

Province

Postal Code

Program Type: Certificate Diploma
 Degree Other: _____

Location

Length of program

Year of studies you are currently in: First Second
 Third Fourth





D. Family Information

What is your marital status?

Single parent

Married with employed spouse

Single

Single and living with employed parent

Married with dependent spouse

If you are married with an employed spouse, do they work full-time or part-time?

Full-time

Part-time

Please list all of your dependents and their birthdates (month, day, year).

Name

Birthdate

Relationship

Name

Birthdate

Relationship

Name

Birthdate

Relationship

Name

Birthdate

Relationship

Name

Birthdate

Relationship

You must submit required documentation for each dependent (e.g., birth certificate, marriage certificate).





E. Budget

If you need more space, you may attach another sheet.

Monthly Expenses

Rent/Mortgage/Residence: \$ _____

Please specify: _____

Transportation (bus pass, gas, car insurance): \$ _____

Please specify: _____

Utilities (hydro, water, internet): \$ _____

Medical/dental premiums: \$ _____

Related health care costs: \$ _____

Food: \$ _____

Childcare: \$ _____

Student loan (attach documentation): \$ _____

Other: \$ _____

Please specify: _____

Other: \$ _____

Please specify: _____

TOTAL: \$ _____





One-Time Education Costs for the 2024-2025 Academic Year

Tuition and required fees for semester indicated:

Mandatory books and supplies for semester indicated:

TOTAL: \$ _____

TOTAL: \$ _____

COMBINED TOTAL (tuition, fees, books, and supplies): \$ _____

Please specify the cost per semester that you are applying for. **You must provide documentation from your post-secondary institution for the cost of tuition and fees.** Please provide documentation from your post-secondary institution for the cost of books and supplies if available.

Income & Financial Resources for 2024-2025 Academic Year

List each source of income, the timeframe, and amount. This includes part-time or full-time work and all actual and projected income from sponsorships, scholarships, bursaries, merit awards, and student loans.

Are you receiving First Nations/Band, Métis, or Inuit IPSE sponsorship/funding?

Yes No (If yes, include amounts below.)

Tuition and fees for the 2024-2025 academic year: \$ _____

Books and supplies: \$ _____

Monthly living allowance: \$ _____ per month **x** _____ months = \$ _____

Other (please specify): _____ \$ _____

TOTAL: \$ _____





Employment status:

Full-time Part-time Unemployed

Part-time or full-time work From (MM/YY) To (MM/YY) \$/Month

Part-time or full-time work From (MM/YY) To (MM/YY) \$/Month

Part-time or full-time work From (MM/YY) To (MM/YY) \$/Month

TOTAL: \$ _____

Please list another other income sources, the type of income, and if the income is pending or confirmed (e.g., scholarships, bursaries, loans).

Income source From (MM/YY) To (MM/YY) \$/Month

Income source From (MM/YY) To (MM/YY) \$/Month

Income source From (MM/YY) To (MM/YY) \$/Month

Income source From (MM/YY) To (MM/YY) \$/Month

Income source From (MM/YY) To (MM/YY) \$/Month

TOTAL: \$ _____



F. Declarations

I declare that I need assistance to help finance my education and the information I have provided in this application form is, to the best of my knowledge, true, correct, and complete.

I understand that the information I have provided herein is subject to verification and audit.

I understand that if I do not provide complete, accurate information or if I obtain or intend to access financial assistance by fraudulent means, I may be denied a first citizens fund bursary now and in the future.

I consent to the exchange of information between appropriate financial institutions, schools, municipal, provincial, and federal government ministries, departments and agencies solely for the purpose of verifying or investigating information pertaining to this application and related documents.

Collection and use of information: personal information on this form is collected under the authority of the special accounts appropriation and control act (RSBC 1996, c. 436). The information collected will be used solely for the purpose of determining eligibility for a First Citizens Fund student bursary. Public announcements may be made indicating the amount of the bursary and the recipient's name. For more information regarding the collection and use of this information, please contact the bursary office.

Eligibility for this program is determined by First Citizens Fund Student Bursary Program provincial policy criteria.

Applicant Signature

Date (MM/DD/YYYY)

