



EDUCATION DEPARTMENT

# High School Student Allowance Application

## PERSONAL & CONTACT INFORMATION

First Name:	Middle Initial(s):	Last Name:
MCFN 10 Digit Registration Number:	Expiry Date:	
Date of Birth:	Cell Phone:	Home Phone:
Physical Address (Where do you live?):	Mailing Address (If different from physical address):	
Email Address:	Best Way to Reach You (Please Circle):	
	Cell Phone	Home Phone      Email

## SECONDARY SCHOOL INFORMATION

I am registered as a <b>full-time</b> student at: <input type="checkbox"/> Hagersville Secondary School (HSS) <input type="checkbox"/> Assumption College School (ACS) <input type="checkbox"/> McKinnon Park Secondary School (MPSS) <input type="checkbox"/> Other: _____	I am registered as a <b>part-time</b> student at: <input type="checkbox"/> Hagersville Secondary School (HSS) <input type="checkbox"/> Assumption College School (ACS) <input type="checkbox"/> McKinnon Park Secondary School (MPSS) <input type="checkbox"/> Other: _____
I am applying for high school allowance for credits obtained during: <input type="checkbox"/> Fall (September to January) 20____ <input type="checkbox"/> Winter (January to June) 20____	I am applying for high school allowance for credits obtained during: <input type="checkbox"/> Fall (September to January) 20____ <input type="checkbox"/> Winter (January to June) 20____

I, \_\_\_\_\_, am applying for the high school allowance for my child/ward who is under the age of 16 and certify that the information above is true and correct.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

I, \_\_\_\_\_, am applying for the high school allowance and certify that the information above is true and correct.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



Education Department,  
Mississaugas of the Credit First Nation  
2789 Mississauga Road, Bldg. #3, RR 6, Hagersville, Ontario N0A 1H0



Phone: (905) 768-4983  
Fax: (905) 768-0944





EDUCATION DEPARTMENT

# HIGH SCHOOL STUDENT ALLOWANCE APPLICATION

## GOAL

*To increase the interest of our First Nation students to obtain their High School Diploma*

## HIGH SCHOOL ALLOWANCE

*A high school allowance will be based on the number of credits obtained in each semester*

CREDITS, BONUS & GRADES	VALUE	NON ALLOWANCE GRADES
Each Credit	\$25.00	C 60% - 69%
Attendance (Max. 1 day/semester missed)	\$20.00	D 50% - 59%
A's (80% - 100%)	\$20.00	Failure 49% and below
B's (70% - 79%)	\$15.00	
Course Fees & Student Fees (Subject to approval. Not all courses/student fees are covered)	Receipts Needed	

*Providing the following criteria is met:*

- A. To be eligible, you must:
  - I. Be a registered band member of the Mississaugas of the Credit First Nation
  - II. Reside on the Mississaugas of the Credit First Nation
  - III. Be on a nominal roll and be enrolled in a FULL TIME program (3 classes/semester with the exception of students in their graduating semester) at a secondary school on November 30<sup>th</sup> and May 31<sup>st</sup> of each academic year
- B. You are ineligible if:
  - I. You are over the age of 21 and enrolled in high school
  - II. You are receiving any type of assistance through employment and training for your high school education
- C. Students wishing to apply for an allowance must complete their application by the end of November of each academic year. Applications for allowance may be picked up at the Education Office or from the secondary school counsellor.

**\*\* Cheques for first semester will be issued in February and July for second semester, of each academic year. All required documentation must be completed prior to the issuing of the cheque.\*\***



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