



Pukatawagan Education Authority Inc.

P.O. Box 318
Pukatawagan, Manitoba
R0B 1G0

Phone: 1(204)553-2163
Fax: 1(204)553-2225

APPLICATION FOR HIGH SCHOOL EDUCATION ASSISTANCE

Name	Treaty #	First Nation

Date of Birth

Name of Parent/Guardian

Address of Student	Address of parent/Guardian if different

Home Phone #	Emergency Contact Name & Number

Describe any physical/medical condition that may impact on your participation in Educational Activities:

List the recreational activities, hobbies, sports, clubs and/or groups that you participate in on a regular basis:

Have you ever had to appear in the courts?

Y

N

If you are on probation, provide the name and address of your Probation Office and the terms of your probation:

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Last School Attended

Grade

Month/Year completed

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Name and address of school you are applying for sponsorship to attend:

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Type of Program: Vocational Modified/Remedial Regular Business Academic/University

Describe your current education goals or objectives:

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Describe your current career goals or types of occupations you would like to pursue in the future:

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Explain why the Education Authority should invest in your education by sponsoring you at this time:

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Signature of Student

Signature of Parent (if student is under 18)

Date: _____