



Samson Education Trust Fund

Grade 9
Achievement Award
Application Form

STUDENT INFORMATION

Name of Student: _____
(include first, middle and surname)
Date of Birth: _____
Samson Band Number: _____
Student's Address: _____

Telephone/Contact No: _____

SCHOOL HISTORY

Name of Previous School Attended: _____
Address: _____

Name of School into Grade 10: _____
Address: _____

PARENT OR LEGAL GUARDIAN INFORMATION

Parent/Guardian: _____

Relationship to Applicant: _____

Address of Parent/Guardian: _____

(if different from student's)

Telephone/Contact Number: _____

INFORMATION TO ACCOMPANY APPLICATION

The Samson Education Trust Fund requires the student to submit the following documentation to accompany your application:

- Grade 9 Certificate of Completion
- Grade 9 Final Report Card
- Grade 10 Letter of Acceptance
- Photocopy and/or Proof of Samson Cree Nation Membership
- Deadline is one year of graduation

APPLICANT/ PARENT SIGNATURES

Student's Signature

Date

Parent/Guardian Signature

Date

*Samson Education Trust Fund
Box 658
Maskwacis, Alberta
T0C 1N0
Tel: (780) 585-2211 or (780) 585-2232
Toll Free: 1-800-843-7359
Fax: (780) 585 3857
louiseomeasoo@scnea.com*