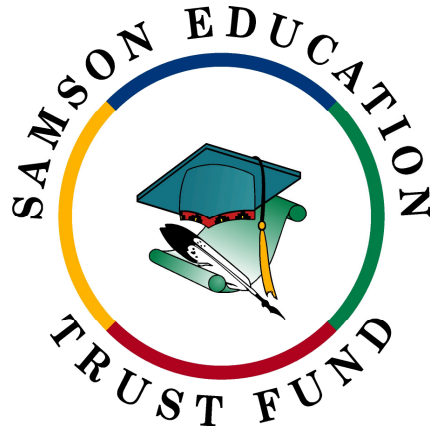


Samson Education Trust Fund
Application for Awards Program



APPLICATION DEADLINE

1 year after graduation or convocation

Samson Education Trust Fund
Box 658
HOBBEWA, Alberta
T0C 1N0
Tel: (780) 585-2211 or (780) 585-2232
Toll Free: 1-800-843-7359
Fax: (780) 585-3857

You must provide the following information with your application:

- _____ Most recent transcripts. Please provide marks (transcripts) for the last year you attended.
- _____ Letter of Completion from the recognized educational institution, stating length of program
- _____ You have signed the attached Release of Information form.
- _____ Official Diploma and/or Certificate

**Post Secondary/Technical & Trades
Programs/Scholarships/Certification Programs
Application for Awards Program**

APPLYING FOR: Academic Year _____

STUDENT INFORMATION:

Name _____
Address _____

Band No _____ Date of Birth _____
Telephone _____ Other Contact _____

PROGRAM INFORMATION:

Name of Program _____
Name of School _____
Location / Address _____
First Day of School _____
Last Day of School _____
How Long was Your Program _____
Graduation Date _____

Signature _____ Date _____

| | |
|---------------------------------------|-------------------------|
| For Office Use Only | |
| Application Approved: | ____ Yes ____ No |
| If No, reason why: | _____ _____ _____ |
| Additional Notes: | _____ _____ |
| _____ SETF Coordinator's Signature | _____ Date |

**Post Secondary/Technical & Trades
Programs/Scholarships/Certification Programs
Application for Awards Program**

Authorization for Release of Information

I, _____, **HAVE READ** and do hereby authorize:

(insert name of school / institution)

to release to the Samson Education Trust Fund Incentive Program whatever information they may require concerning me. The information to which the Samson Education Trust Fund Incentive Program is authorized to obtain includes, but is not limited to the following:

- Official transcripts of grades.
- Details as to my course of study including specific courses taken and class schedule.
- Copies of any notices, advice or direction regarding my ongoing status as a student including attendance reports.
- Information in respect to per capita or special payments to minor children or myself from the Samson Cree Nation.
- Information in respect to special assistance payments (if any) to minor children or myself from the Samson Cree Nation Administration or government agency.
- Any information deemed pertinent to my application to the Samson Education Trust Fund Incentive Program.

I do hereby agree to notify SETF office in the event:

- that I withdraw from the educational institution I am currently attending;
- that I fail to attend classes for more than five (5) consecutive days.

I trust that this is an irrevocable consent, which the Samson Education Trust fund may present from time to time. This consent may not be withdrawn from me for so long as I am receiving sponsorship from the Samson Education Trust Fund. I have read and understand the Samson Education Trust Fund Policy and agree to follow the procedures contained therein. I further understand that in the event I receive any funds from the Samson Education Trust Fund for which I am not entitled to, I agree to reimburse in full said funds and hereby certify that all information in this application is true.

Student's Signature

Date