



Soda Creek Indian Band
3405 Mountain House Rd.
Williams Lake, BC V2G 5L5

Education Assistance Application (EAA)

A. Purpose of this Funding

To provide financial assistance to registered Soda Creek Indian Band (Xat'sūll First Nation) Members that are committed to furthering their education/training program (formal/personal growth), and/or taking part in an activity related to their personal well-being and/or that of the community.

- Special Consideration will be given to applications for Trades training, or other related fields; and,
- Preference will be given to applicants not receiving full-time Post-Secondary funding.

Activities may include;

1. Upgrading – Adult Education Programs
Tuition; books; supplies and incentive
2. Vocational & Skills Training Program
Tuition; books; supplies and incentive
3. Field Trips (including cultural exchange programs) transportation, accommodation, food – up to a maximum of \$200.00
4. Graduation Expenses from high school and post secondary institutions up to a maximum of \$250.00
5. School Supplies for children of post secondary students, who **must** leave the Williams Lake area to further their education {\$100.00 per student per year}
6. Education Committee Conference and training expenses to a maximum of \$600.00/year.
7. Educational Support such as tutoring, short term classes, equipment and supplies.
8. Personal Growth (e.g. Self-Awareness Programs, Parenting Skills, Cultural Awareness)
9. Extracurricular Activities (e.g. clubs, sports and recreation)

All successful applicants will provide a written/visual report of their specified funded activity to the Education Committee and may be requested to share this report with the community.

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B. Application for Funding

Applications for funding will be accessible through the Education Department and accepted on an on-going basis by the Secretary/Receptionist at the Xat'sùll First Nation Office.

Completed applications will include:

- 1.) Application
- 2.) Signed Applicant Information Release Form
- 3.) Signed Consent to Release Information
- 4.) Household Income & Expense Form
- 5.) Background Information on Program Costs

All applicants must be willing to volunteer for community services; Education Coordinator will assist in identifying and overseeing the Community Service Work; and whenever possible, service hours will be in an area reflecting the funded training/or skills development.

Applications for Education Assistance must be submitted at least one month before the activity start date, and at least one week prior to the next scheduled Education Committee Meeting date, in order to be considered for funding.

Late applications may be reviewed at the next scheduled Education Committee Meeting, provided the program start date is not after the meeting date.

Applications will be date stamped and submitted to the Education Coordinator for verification of eligibility and completeness of application; if incomplete, Education Coordinator will work with applicant to complete application, for consideration by the Education Committee at the next Education Committee meeting.

The Education Committee will review eligible applications and make the decision to fund in whole or in part; according to the Education Committee Terms of Reference; Education Assistance Funding Purposes; the applicant's commitment to completing funded activity and reporting and available funding.

All applicants will be notified by the Education Coordinator, of the Education Committee's decision within 5 working days of the decision being made.

Applicants are limited to accessing Education Assistance once per year.

C. Meeting Dates:

Education Committee meets on a monthly basis. Please request exact date(s). It is the responsibility of the applicant to ensure all necessary information is received by the Education Coordinator, one week prior to the Education Committee meeting date, and at least one month before the program start date.

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D. Appeals

A Letter of Appeal may be submitted to the Education Coordinator, who will set-up a meeting date and time with the Applicant to discuss their Appeal with the Education Committee.

Further appeals will be directed to SCIB Chief and Council by the Education Coordinator through the Band Administrator.

E. Funding Allocations

Based on available funding, funding will be provided for eligible expenses:

- a) directly to the Applicant's Specified provider of education/training program or activity, and/or
- b) reimbursed to applicant upon provision of original receipts.

Funding will only be provided for activities approved for, in writing by the Education Committee.

F. Confirmation of Activities

All applicants that receive Education Assistance Funding will submit receipts and written/visual reports to the Education Coordinator within 5 working days of completion of funded activity.

Education Committee:

Education Committee of up to Five (5) Members, appointed by Chief and Council to provide a consultative forum that will effectively address education funding applications received by the Soda Creek Indian Band Education Department with particular reference to the requirements of the SCIB Education Department Funding Arrangements; [e.g. Indigenous and Northern Affairs Canada (INAC); Spectra Energy Education Assistance (SEEA), Mount Polley Education Assistance (MPEA) and Gibraltar Education Assistance (GEA)].

Lack of Education Committee Membership/ Quorum

In the event that the Education Committee does not have at least three (3) members appointed to the Committee, or is unable to attain a quorum; a regularly scheduled Committee Meeting may be held using alternate decision makers, pre-appointed by Chief and Council. These alternates may include, but not limited to:

- a. A recognized Elder (55+ years) of the community;
- b. An Elected Council Member
- c. The Band Administrator
- d. A staff person in a Management Role
- e. A recognized Youth (aged 18 – 29 years) of the community

Education Coordinator

Phone: 250-989-2323 ext. 104

Email: education@xatsull.com



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Full Name: _____
Last First Middle Initial

Address: _____
Street Address Apartment #

City Province Postal Code

Home #: _____ Cell #: _____

Message #: _____ Email: _____

Status # _____ Date of Birth: _____
Soda Creek Band Number dd/mm/yyyy

Marital Status: Single Married/Common Law Is spouse employed? Yes: No:

Dependent(s) Name:	Age(s)	Birth Date(s) dd/mm/yyyy
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Funding Application for:

Education: Training: Personal Growth: Activity:

Specify Program: _____

Program Location: _____ Dates: _____ to: _____
dd/mm/yyyy dd/mm/yyyy

School/Company: _____
Full name of school or company providing specified program

Address: _____
Street Address Apartment #

City Province Postal Code

Contact Person: _____ Phone: _____

Fax: _____ Email: _____

Total Cost of Program: \$ _____ Amount Applying for: \$ _____

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Reporting process:

Written and/or visual summary of activity to be submitted to the Soda Creek Indian Band Education Committee and may be published in the Fraser River Run:

Date final report will be available: _____
dd/mm/yyyy

Signature of Applicant: _____ Date: _____
dd/mm/yyyy

Program Application For: _____ Amount: \$ _____

Application Received by: _____ Date: _____
dd/mm/yyyy

Application Submitted by: _____ Date: _____
dd/mm/yyyy

Education Committee Meeting: Location: _____ Date: _____
dd/mm/yyyy

Decision: Approved: Denied: Conditional Approval:

Rational: _____

All decisions must have agreement of at least three (3) Education Committee members.

Education Committee Member Signature Date: _____
dd/mm/yyyy

Education Committee Member Signature Date: _____
dd/mm/yyyy

Education Committee Member Signature Date: _____
dd/mm/yyyy

Education Committee Member Signature Date: _____
dd/mm/yyyy

Education Committee Member Signature Date: _____
dd/mm/yyyy

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Applicant Information Release Form

Applicant Name: _____
Institution Name: _____
Identification Number: _____

I hereby authorize the Soda Creek Indian Band, Education Coordinator,
_____ to obtain information regarding my application and/or
academic status from the above named institution. This includes inquires regarding acceptance
into the program that funding is being applied for and/or attendance, fees, academic planning and
any other pertinent student information. I authorize the Soda Creek Indian Band Education
Coordinator to contact; appropriate officials for copies of my records and status as needed.

Applicant/Student Signature Date

Consent to Release of Information

I, _____, Soda Creek Indian Band number 716
(Print Full Name) (7 numbers)
hereby consent to the release of personal and financial information to the Soda Creek Indian
Band, Education Coordinator by the following Soda Creek Indian Band Departments:

- Social Assistance
- Housing
- Finance

For the purpose of confirming information provided by me, _____
in this Education Assistance Application for _____, and to
determine my eligibility for funding. (Print purpose of Application)

Applicant/Student Signature Date: _____

I, _____, Soda Creek Indian Band, Education Coordinator, respect
Print Education Coordinator Name
the above named applicant's right to privacy and will only use the information accessed through
this release for the expressed purposes of the release of information.

Education Coordinator Signature Date: _____

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Household Income and Expense Form

Applicant Name: _____ Date: _____

All Income (Working/SA/EI)		Monthly Budget Summary	
Income (Self)			
Income (Significant other)		Total Income	
Income (Other)		Total Expenses	
Gifts Received		Balance	
Refunds/Reimbursements			
Transfer from Savings			
Other			
Total INCOME			
		SAVINGS	
HOME EXPENSES		Emergency Fund	
Mortgage/Rent		Transfer to Savings	
Hydro		Retirement	
Gas/Oil		Investments	
Phone		College	
Cable/Satellite		Other	
Internet		Total SAVINGS	
Furnishings/Appliances			
Vehicle Expense(s)		OBLIGATIONS	
Home Supplies		Student Loan	
Maintenance		Other Loan	
Improvements		Credit Card #1	
Other		Credit Card #2	
Total HOME EXPENSES		Credit Card #3	
		Alimony/Child Care	
DAILY LIVING (per month)		Federal Taxes	
Groceries		Legal Fees	
Personal Supplies		Other	
Clothing		Total OBLIGATIONS	
Dining/Eating Out			
Dry Cleaning		BUSINESS EXPENSE	
Salon/Barber		Deductible Expenses	
Discretionary [Name 1]		Non-Deductible Expenses	
Total DAILY LIVING		Total BUSINESS EXPENSE	