  
**School Supplies Application**  
***School Supply funding for Nuchatlaht band members in Grade 1-12***  
  
***Please fill in completely to avoid delays***

Applicant’s Full Name: Telephone #:   
Address: Email:   
 Alternative #:

***PLEASE FILL IN THE STUDENT’S INFORMATION***

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| Student Name: | Grade: | School Information: | Status Number: |
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***PLEASE ANSWER THE FOLLOWING:***  
1) Have you applied for funding from any other funding source(s) or do you expect to receive funding from another source? If so, where?  
2) Does your child(ren) live with you?   
3) Are you currently receiving social assistance at the Ministry of Human Resources?   
4) If so, please give the name and number of your FAW:  
  
***STATEMENT OF AGREEMENT***I agree to use the school supplies funding from the Band for school supplies. All other school related fees are the responsibility of each parent.  
  
I agree to give the Nuchatlaht office employees authorization to verify or obtain funding information with Human Resources and other First Nation Band Organizations.  
  
Applicant’s Signature: Date: