

Application Deadline: May 30th

BERENS RIVER FIRST NATION STUDENT SERVICES

830 Empress Street Winnipeg, Manitoba R3G 3H3 Phone: (204) 982-0690 Fax: (204) 982-0698

HIGH SCHOOL | HOME PLACEMENT SPONSORSHIP APPLICATION

PERSONAL IDENTIFICATION
Last Name: First Name:
Date of Birth:/ Treaty No.: Social Insurance No.:
Family Medical No.: P.H.I.N
Parents/Guardians: Phone Number:
Mailing Address:
PERSONAL INFORMATION
Does the Applicant: Have any Allergies or Medical Difficulties? No Yes (If Yes, Please Explain in Detail)
Require medications or medical monitoring by a physician? No Yes (If yes, Explain)
Have any Physical, Social or Mental Barriers/Disabilities? No Yes (If yes, please explain)
EDUCATION BACKGROUND
Name of Institution Location:
Last Grade Completed:Year:
PRINCIPAL'S CONSENT
Grade Completed(Number of Credits Earned in Senior 1) (PRINCIPAL'S SIGNATURE)
ASSISTANCE REQUIRED
I hereby make application:
(A) To Attend School in School in
(B) To Enroll in Grade from to to (C) I require Home Placement No Yes Yes
(D) To Reside with at
Or to live in
(NAME OF RESIDENCE)
(E) If I am a previous Sponsored Student and have Voluntarily Withdrawn from my studies, I have included a Letter stating my Goals and Personal Changes I have made to my school lifestyle to succeed. (Required)
I understand that my selection for placement, once made is binding upon me, and cannot be changed without good reason or consultation with parents, guardians, and PHP Education Counsellor.
Date: (SIGNATURE OF APPLICANT)

AUTHORIZATION	AUTHORIZATION OF PARENT/GUARDIAN (if student is 17 years of age or younger)			
I hereby authorize the B	erens River Student Services to act on my behalf	as stated hereunder:		
 (A) To arrange educational assistance for my child/ward as noted in Part B above. (B) To Grant permission for medical, optical or dental treatment that my child/ward may require, also for emergency surgical treatment, but only in event that I cannot be contacted. (C) To Grant permission for my child/ward to travel, as required, to participate in the program noted above and supervised activities organized for students, individual unsupervised travel must be authorized by parents/guardians in writing before will be permitted. (D) To ensure that all houseparents/guardians are subject to provide a criminal check/criminal abuse registry. I understand that: (A) Berens River Student Services, by policy, is only responsible for travel in September, Christmas Break, and in June: That a other trips are my responsibility unless otherwise arranged by Berens River Student Services. (B) All funding provided to my child during his/her sponsorship covers food, shelter, transportation, and school related 				
	najor purchases including clothing are my contin			
This Authorization is to r Or until it has been cand	remain in effect from selled in writing by either party or the student is a	to discharge/withdraws from the program.		
DATE	SIGNATURE OF PARENT/GUARDIAN	RELATIONSHIP TO CHILD		
I hereby certify that the a	above authorization is understood by the parent/g	guardian and that I witnessed the signature		
Thoropy continy trace trice	and the data of the parents	and the trace with the same and		
DATE	SIGNATURE OF WITNESS	POSITION OF WITNESS		
HOME/SCHOOL CO	OORDINATOR'S COMMENTS & RECO	OMMENDATIONS		
	(DATE)	(SIGNATURE)		
(D) To provide my ma (E) To refrain from the (F) To abide by all rul	ards required by the school for continuation orks and reports to Berens River Student Server or use of alcohol and/or drugs during the term es as set by my Houseparents/Home Placem rules and regulations, as may from time to ti	vices upon my Counsellor's request. n of sponsorship.		
DATE	SIGNATURE OF APPLICANT			
DATE	SIGNATURE OF PARENT/GUARDIAN	RELATIONSHIP TO CHILD		
REQUEST FOR C	ONSENT FOR THE RELEASE OF I	POLICE INFORMATION		
REQUEST FOR C	ONSENT FOR THE RELEASE OF I	TOLICE INFORMATION		
STATEMENT OF CONSE	NT: I consent to a search of all records available ling of guilt or convictions and court orders regist	ler 18 years of age - a parent/guardian must sign: e at the time the search is conducted, including charg- tered in my name in the National Repository and local		
Dated this da	ay of (month), (year) Sign	nature:		
mation from available re		ARTY: I consent to the release of any and all infor- tudent Services. All information will remain confiden-		
Dated this da	ay of (month), (year) Sign	nature:		
If you have any question Berens River Student Se	Vinnipeg, MB R3C 1X7 90 Local: (204) 982-0690			

SIGNATURE OF AUTHORIZING OFFICER

POSITION

DATE



AUTHORIZATION TO RELEASE INFORMATION FORM

,	, authorize
Student Name (PLEASE PRINT)	School (PLEASE PRINT)
o release information re	garding my attendance, transcript(s), progress reports and academic record(s
For courses which I have bee	n sponsored for in the past and/or courses for which I am currently registered) to:
	Berens River Student Services 830 Empress Street Winnipeg, Manitoba R3G 3H3
declare that I have read	Fax: (204) 982-0698 and understood the information on this form.
	and understood the information on this form.
	and understood the information on this form.
I declare that I have read	and understood the information on this form.

Berens River Student Services

Student Responsibilities:

Students are expected to observe and abide by the following rules:

- 1. Students must be respectful and are expected to follow the rules, expectations and regulations of their home placements, house parents and supervisors.
- 2. Students are not to use chemical/drugs/alcohol in home or school. If students are suspected using the mentioned; they will be subjected to a search with the written permission from the parent.
- 3. Students are expected to attend classes every day and to be on time! The Education Counselor and school must be notified when a student is absent due to an illness or an appropriate excuse.
- 4. Students are expected to register for a full course load per semester as required by the school they are registered in (timetables must include Compulsory Courses required to graduate).
- 5. Students **must submit** a monthly progress/attendance report each month **before receiving** their student allowance (bringing a paper copy would be a faster option as there are many other students attending the school you attend).
- 6. All school property, such as textbooks, must be returned to the school when requested.
- 7. Students must inform the Education Counselor immediately of all changes being made; this would include: transferring, withdrawing, or terminating their course of study. Courses cannot be dropped without first getting tutorial assistance and without the authorization of the Education Counselor. It is recommended that students seek for advice first before making this decision. Remember that we are responsible for your sponsorship.
- 8. Students are responsible for being prepared and to purchase school supplies before going to their first day of classes to prevent confusion. *An extra \$50.00 for school supplies is provided with your September and February Allowance.*
- 9. Students are encouraged to participate in school team sports and extracurricular activities within the school and the community.
- 10. Students are advised to register at one institution and stay there until graduation instead of transferring regularly. This can cause confusion and problems with your official Transcript.
- 11. Students should begin thinking about their Goals and Careers in "Senior 1" (Grade 9) and start to work towards that goal and career path while taking courses in school that would later put you on track for College and/or University.
- 12. Students must realize that they are now living away from home for an important purpose and they need to represent their community with honor and respect.
- 13. Students will not be allowed to transfer halfway through the term as it may cause difficulty with the student's classes and credits at a new school.
- 14. Students are to stay at the selected house placement throughout the whole school year.

Termination of Sponsorship:

Students will be terminated from the Program upon recommendation of the school for absenteeism, evidence of failing grades, gross misconduct in the school or home placement or physical abuse of people or property.

If a student considers their termination to be unfair, an appeal may be made to the Berens River Education Committee, and a copy of the appeal must be sent to the Education Counsellor.

The School Board, that you are applying for, will make their decision after reviewing all evidence.

	BY SIGNING, THE STUDENT UNDERSTANDS AND AGREES TO THE FOLLOWING:		
DATE:	STUDENT NAME (PRINT):		
	STUDENT SIGNATURE:		