



Mamu
Tshishkutamashutau
Innu Education

PSEA APPLICATION RENEWAL

This is to certify that I, _____ (name), will be continuing my studies at _____ (institution), in _____ (town), during the following period (complete one row).

| | | |
|-----------------|---------------|-------------|
| fall semester | start (m-d-y) | end (m-d-y) |
| winter semester | start (m-d-y) | end (m-d-y) |
| spring semester | start (m-d-y) | end (m-d-y) |
| intersession | start (m-d-y) | end (m-d-y) |
| work term | start (m-d-y) | end (m-d-y) |

signature: _____ date (m-d-y) ____ - ____ - ____

.....

for office use only

THIS IS TO CERTIFY THAT THE APPLICANT MEETS ALL THE REQUIREMENTS FOR FUNDING UNDER MTIE PSEA PROGRAM GUIDELINES.

| | |
|--|--------------|
| signature | date (m-d-y) |
| approved for funding? yes no | date (m-d-y) |

7.12 Conditions for MTIE PSEA Funding

I do hereby confirm that I am applying for financial assistance and I will:

- 1. meet the requirements of the institution for the continuation of my studies.
- 2. provide transcripts or statements of performance to MTIE at the end of each semester or at scheduled evaluation times.
- 3. report and changes to my student and/or program status to MTIE immediately.

- 4. manage the assistance in a responsible manner.
- 5. obtain a copy of the MTIE Student Handbook, read it and understand it thoroughly.

applicant signature

m d y

7.13 Student Personal Information

| | |
|--------------|-------------------------|
| name | date of birth (m-d-y) |
| | |
| address | status number |
| | |
| phone number | social insurance number |
| | |

funding department:

start date:

end date:

| | |
|----------|--------|
| g/l code | amount |
| | |
| | |
| | |

| | |
|----------------|--|
| name of bank | |
| transit number | |
| branch number | |
| account number | |

student signature

m d y

supervisor signature

m d y