

TULITA FINANCIAL CORPORATION

Box 63 Tulita NT X0E 0K0
Phone: 867-588-3734 Fax: 867-588-4025
E-mail: assistant@tulitalandcorp.ca



SCHOLARSHIP APPLICATION

STUDENT: *Last Name:* _____ *First Name:* _____

APPLICATION DATE: *(Year/Month/Day)* _____

**** APPLICATION DEADLINES****

FALL SEMESTER: *August 15th*

WINTER SEMESTER: *December 15th*

SPRING/SUMMER SEMESTER: *April 15th*

OTHER START DATES: *Two (2) weeks before course date*

REQUIRED DOCUMENTS:

Scholarship Application:.....

Admission Letter from School:

Letter from Institution confirming Full Time Or Part Time enrollment (If not stated in the Admission letter):.....

Prior Year Transcripts (If Re-applying For funding):.....

Copy of Void Cheque:.....

Proof of alternative funding
(NWT student financial assistance/ Provincial Financial
Aid/ASETS):.....

Birth Certificates (For eligible dependants):.....

Signed Scholarship Agreement:.....

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Applicant Information

Full

Name:

Last

First

M.I.

Address:

Street Address

Apartment/Unit #

City

Province

Postal Code

Phone:

Email _____

Are you a member of Tulita Land Corporation? Yes No

Do you have any dependents? Yes No

If Yes, how many of the dependents are below the age of 18, and members of Tulita Land Corporation? _____

Are the dependents living with you while you attend school? YES NO

Did you receive funding from Tulita Financial Corporation in the previous academic year? YES NO

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SCHOOL/ PROGRAM INFORMATION

Name of School/Institution Applied to: _____

School Address: _____
Street Address: _____

City: _____ Province _____ Postal Code _____

Phone: _____ Email: _____

Name of Course/Program Applied to: _____

How many years (or months) does it take to graduate from this program? _____

First Semester

When will the First Semester begin (Day/Month/Year)? _____

When will the First Semester end (Day/Month/Year)? _____

Will you be a Full time or Part time Student for the First Semester? Full time Part time

Second Semester

When will the Second Semester begin(Day/Month/Year)? _____

When will the Second Semester end(Day/Month/Year)? _____

Will you be a Full time or Part time Student for the Second Semester? Full time Part time

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FINANCIAL INFORMATION

Have you applied for NWT Student Financial Assistance (or other Provincial Student Financial Assistance)?

Yes

No

If no, Please explain:

Was your application for NWT Student Financial Assistance (or Provincial Financial Assistance) approved or Denied?

Approved

Pending

Denied

If you:

- did not apply for Provincial Financial Assistance or
 - application for Student Financial Assistance was denied,
- please explain how you intend to fund the remainder of your program if your application for Tulita Financial Corporation Scholarship program is approved?

Personal Savings

Support from Family/Spouse

Employment while at School

Other (Please Explain)

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BANKING INFORMATION

******* (PLEASE ATTACH VOID CHEQUE) *******

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SCHOLARSHIP AGREEMENT

I understand that if I:

- *Provide any false/misleading statements in an application,*
- *Withdraw from the educational institution applied to*
- *Fail to attend the required classes*
- *Fail to notify the Tulita Financial Corporation (in writing) of any changes in my program*

I will be:

- *Required to repay all living allowance amounts paid under the scholarship policy, or will be subject to a one-year suspension from Tulita Financial Corporations scholarship program.*
- *Subject to criminal prosecution and restrictions on accessing the programs of Tulita Financial Corporation.*

I agree with the terms of the Tulita Financial Corporation Scholarship policy

Signature: _____ **Date:** _____

Please forward to:

By mail to:

*Tulita Financial Corporation
P.O Box 63
Tulita NT X0E 0K0*

OR

By Fax to: 867-588-4025

Or

Via Email to: assistant@tulitalandcorp.ca