



NWT HSS SYSTEM BURSARY PROGRAM STUDENT ENROLMENT FORM

COMPLETE THIS FORM WITHIN ONE CALENDAR MONTH PRIOR TO THE START OF EACH SEMESTER OF SCHOOL.

1. TO BE COMPLETED BY STUDENT

<hr/> First and Last Name		
<hr/> Cell / Phone Number	<hr/> Email Address	
<hr/> Date of Birth	<hr/> Social Insurance Number	<hr/> Student ID Number
<p>I declare that my personal and financial information under which I became eligible for NWT HSS System Bursary Program has not changed as of the date of this enrollment. Further, I understand that it is my responsibility to ensure this Student Enrollment Form is completed correctly and submitted to the Program.</p>		
<hr/> Student Signature	<hr/> Date	<hr/> Bursary ID Number

2. TO BE COMPLETED BY EDUCATIONAL INSTITUTION

<hr/> Name of Institution		<hr/> Name of Program of Study	
Of a 100% full course load, this student will be enrolled part-time/full-time in:			
1% - 39%	40% - 59%	60% - 100%	
of a Semester and is registered in the	Fall	Winter	Spring Summer
in a Post-secondary Program	Distance Learning		Upgrading Program
working towards a Certificate	Diploma	Degree	Masters Doctorate
in Year (year #) of a (total years) year program.			
<hr/> Title of School Official		<hr/> Phone Number	
<hr/> Printed Name		<hr/> Signature of School Official	
		<hr/> Email Address	
		<hr/> Date	

This enrollment form is used to confirm a student’s eligibility and CANNOT be signed by the institution MORE THAN ONE CALENDAR MONTH before THIS semester start date. RETURN BY EMAIL to NWTHSS_Bursary@gov.nt.ca.



The information in this form is being collected under the authority of section 40(c)(i) of the Access to Information and Protection of Privacy Act (ATIPP) and in support of your application to the HSS Bursary Program. The information provided is protected by the privacy provisions of ATIPP. If you have any questions about collection or use of the information, please contact the Manager, Talent Acquisition at (867) 767-9105 ext. 40183.