



Application Deadline: April 30

**BERENS RIVER FIRST NATION
STUDENT SERVICES**

204-1700 Ellice Avenue
Winnipeg, Manitoba
R3H 0B1

Phone: (204) 982-0690
Fax: (204) 982-0698
Email: php@berensriver.ca

HIGH SCHOOL | HOME PLACEMENT SPONSORSHIP APPLICATION

PERSONAL IDENTIFICATION

Last Name: _____ First Name: _____

Age: _____ Treaty No.: _____ Social Insurance No.: _____

Family Medical No.: _____ P.H.I.N. _____

Phone Number: _____ Email: _____

Home Address: _____

PERSONAL INFORMATION

Does the Applicant:

Have any Allergies or Medical Difficulties? (Circle one) **No** **Yes** (If Yes, Please Explain in Detail)

Who are your Family / Legal Guardians?

Mother's Name: _____ Father's Name: _____

In case of Emergency, please designate your emergency contact person: _____

Phone/Cell Number: _____ Alternative Number: _____

EDUCATION BACKGROUND

Name of Institution: _____ Location: _____

How many years were you sponsored? : _____ Total High School Credits achieved?: _____

Last Grade Completed: _____ Year: _____ Current Grade Applying For: _____

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 _____

(B) To Enroll in Grade _____ from _____ to _____

(C) **I require Home Placement** **No** **Yes**

(D) To Reside with: _____ **Address:** _____

Or to live in: _____ **Address:** _____

Houseparent Phone Number: _____

(E) If I am a previous Sponsored Student and have Voluntarily Withdrawn from my studies, I have included a Letter stating my Goals and Personal Changes I have made to my school lifestyle to succeed.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 OF PARENT/GUARDIAN (if student is 17 years of age or younger)

I hereby authorize the Berens 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 it 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 all 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 supplies. All other major purchases including clothing are my continued responsibility.

This Authorization is to remain in effect from _____ to _____
Or until it has been cancelled in writing by either party or the student is discharge/withdraws from the program.

DATE	SIGNATURE OF PARENT/GUARDIAN	RELATIONSHIP TO CHILD
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I hereby certify that the above authorization is understood by the parent/guardian and that I witnessed the signature

DATE	SIGNATURE OF WITNESS	POSITION OF WITNESS
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HOME/SCHOOL COORDINATOR'S COMMENTS & RECOMMENDATIONS

(DATE)

(SIGNATURE)

I Understand the following conditions for sponsorship by the Berens River First Nation Student Services

- (A) To attend all scheduled classes regularly.
- (B) To consult with the Counsellor if any problems arise; academically, emotionally, physically or financially.
- (C) To meet the standards required by the school for continuation in my program of studies.
- (D) To provide my marks and reports to Berens River Student Services upon my Counsellor's request.
- (E) To refrain from the use of alcohol and/or drugs during the term of sponsorship.
- (F) To abide by all rules as set by my Houseparents/Home Placement.
- (G) To adhere to any rules and regulations, as may from time to time, be advised by the Berens River First Nation

DATE	SIGNATURE OF APPLICANT	
DATE	SIGNATURE OF PARENT/GUARDIAN	RELATIONSHIP TO CHILD

REQUEST FOR CONSENT FOR THE RELEASE OF POLICE INFORMATION

All applicants complete this section and sign, if an applicant is under 18 years of age - a parent/guardian must sign:
STATEMENT OF CONSENT: I consent to a search of all records available at the time the search is conducted, including charges before the courts, finding of guilt or convictions and court orders registered in my name in the National Repository and local records available to police service.

Dated this _____ day of _____ (month), _____ (year) Signature: _____

WAIVER FOR CONSENT OF RELEASE OF INFORMATION TO THIRD PARTY: I consent to the release of any and all information from available records to the authorized person of Berens River Student Services. All information will remain confidential in accordance with Berens River Education Authority Policies.

Dated this _____ day of _____ (month), _____ (year) Signature: _____

Please note that all fields are required to be completed, incomplete applications will not be processed.
If you have any questions or require assistance in completing this application please contact us at:
Berens River Student Services:
 204-1700 Ellice Avenue, Winnipeg, Manitoba R3H 0B1
Toll Free: 1-888-982-0690 Local: (204) 982-0690
Email: php@berensriver.ca Fax: (204) 982-0698

DATE	SIGNATURE OF AUTHORIZING OFFICER	POSITION
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Berens River Student Services

Student Responsibilities:

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

1. Students must be respectful and are expected to follow the rules, expectations and regulations of their home parents and supervisors.
2. Students are not to use chemicals/drugs/alcohol in home or school. If students are suspected using the mentioned will be subjected to a search with the written permission from the parent.
3. Students are expected to attend classes everyday and to be on time! The Education Counsellor or the school must be notified when a student is absent due to illness or an excuse.
4. Students are expected to register for a full course load per semester as required by the school they are registered in.
5. Students must submit a monthly progress/attendance report each month before receiving their student allowance.
6. All school property, such as textbooks, must be returned to the school when requested.
7. Students must inform the Education Counsellor immediately of all changes being made like transferring, withdrawing or terminating their course of study. Courses cannot be dropped without first getting tutorial assistance and without the authorization of the Education Counsellor. 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.
9. Students are encouraged to participate in school team sports and extra-curricular activities within the school and the community.
10. Students are encouraged to get established at one institution and stay there until graduation instead of transferring regularly.
11. Students should begin thinking about their Goals and Careers in "Senior 1" in order for them to work towards that particular area while taking courses in a school outside the community.
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.

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.

Students may be reinstated in the program upon written recommendation of the Berens River School Board.

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

The School Board will make its decision after reviewing all evidence.

BY SIGNING THE STUDENT UNDERSTANDS AND AGREES TO THE FOLLOWING:

DATE: _____

STUDENT NAME: _____
PRINT NAME

STUDENT SIGNATURE: _____

EDUCATION COUNSELLOR SIGNATURE:
DENNIS BOULANGER, PHP PROGRAM