

## INFORMATION FOR RETURNING POST-SECONDARY PROGRAM STUDENTS

### WHO IS CONSIDERED A RETURNING STUDENT?

This application is ONLY for students who

- have previously received *Advancing Futures* funding, and
- are attending the same program at the same school (including upgrading) as last academic year.

Students who have withdrawn from school or who have taken six months (one year for trade program students) or more away from school must fill out either the **New Student or Upgrading Application Form**. If you are unsure which form to use, call *Advancing Futures* at (780) 415-0085 (toll-free, dial 310-0000 first).

### WHEN DO I APPLY?

Before applying for funding, you must have submitted an application to attend an educational institution.

As a returning post-secondary student, you are eligible to apply for continued funding between March 15 and June 1, October 1 or February 1. **Applications received prior to the June 1 deadline will be considered for funding for the full academic year. Applications received prior to the October 1 deadline will be considered for Winter Term, and prior to the February 1 deadline for the Spring and Summer terms.** Applications received **AFTER** June 1, October 1 or February 1 will **NOT** be eligible for funding. Trade program students may apply throughout the year, provided your application is received 6-8 weeks prior to your start date.

### ABOUT YOUR APPLICATION

*Advancing Futures* applications take 6-8 weeks to process. All sections of the application form MUST be completed before it can be reviewed. Incomplete applications will be returned and not processed.

The personal information collected on this form will be used to review your eligibility for the *Advancing Futures* bursary and the Alberta Adult Health Benefit program.

If you have questions about the *Advancing Futures* bursary program or this application form, you can call (780) 415-0085 (toll-free, dial 310-0000 first). You can e-mail us at [HS.AdvancingFutures@gov.ab.ca](mailto:HS.AdvancingFutures@gov.ab.ca) or visit us at [www.advancingfutures.gov.ab.ca](http://www.advancingfutures.gov.ab.ca).

### THINGS YOU SHOULD KNOW

#### ◆ Health Care Coverage

Students approved to receive an *Advancing Futures* bursary may be enrolled in the Alberta Adult Health Benefit Program if they meet the program's criteria. (Students who have health coverage through Assured Income for the Severely Handicapped (AISH) or who have Registered Status under the Indian Act already receive health coverage and do not qualify for the *Advancing Futures* health benefit.) The Alberta Adult Health Benefit program pays for health services that are not available through standard Alberta Health Care insurance, such as eyeglasses, prescription drugs, and dental care. Additional information about *Advancing Futures* student health coverage can be found on our website at [www.advancingfutures.gov.ab.ca](http://www.advancingfutures.gov.ab.ca).

◆ **Staying In Touch**

If your personal information (address, bank account direct deposit information, phone number or e-mail, etc.) changes, you must contact the *Advancing Futures* bursary program IMMEDIATELY! Failure to notify the program of changes may affect your funding.

◆ **Your Responsibilities Concerning Funding**

Recipients may be provided a maximum fixed monthly living allowance based on double occupancy.

<b>Student Type</b>	Single Student	Student with one child	Student with two children	Student with three children	Student with four children
<b>Full-time</b>	\$1099.00	\$1940.00	\$2517.00	\$3094.00	\$3671.00
<b>Part-time</b>	\$549.50	\$970.00	\$1258.50	\$1547.00	\$1835.50

It can be unlawful to receive multiple sources of funding. If you are awarded an *Advancing Futures* bursary, it is recommended that you inform any other programs from whom you are receiving financial assistance.

**I’VE SUBMITTED MY APPLICATION. NOW WHAT?** 

---

Completing your application is the first step of the process for receiving funding. Once your application has been reviewed for completeness and it has been determined that you are eligible to receive funding (this may take as long as 6-8 weeks), you will be notified of your next steps by your program coordinator.

Students who meet the program requirements will be **CONDITIONALLY APPROVED** for funding. At this point, you will receive a letter explaining any further steps that need to be completed. **ALL STUDENTS** who are conditionally approved will be required to complete the *Advancing Futures* Online Orientation and the Resiliency Survey before they can receive final approval for funding. A letter explaining how to do this will be mailed to you once you are conditionally approved.

When you have completed all of the requirements outlined in your Conditional Approval letter, *Advancing Futures* will provide final approval of your application for funding.

**RETURNING POST-SECONDARY  
PROGRAM STUDENTS  
APPLICATION**

**2017 - 2018  
Academic Year**

**SECTION 1: PERSONAL INFORMATION (all portions must be completed)**

gender	last name and last name while in care if different *		first name
birth date (YYYY-MM-DD)	Social Insurance Number	Alberta Health Care Number	Do you have Registered Status under the Indian Act? <input type="checkbox"/> yes <input type="checkbox"/> no
Are you currently covered under a health benefit plan? (e. g., guardian's, spouse's, Human Services, etc.) <input type="checkbox"/> no <input type="checkbox"/> yes		If "yes," we need to know . . .	name of policy holder

**SECTION 2: CHILDREN LIVING WITH YOU**

Complete this section if you have children \*living with you; otherwise, go on to Section 3.

last name	first name	birthdate (YYYY-MM-DD)	Alberta Health Care Number

**\*Submit a copy of a birth certificate, an Alberta Health Care card, or Guardianship Papers for each dependent child living with you. (If you have done so as part of an earlier application, you do not need to re-submit them.)**

Are you requesting <i>Advancing Futures</i> to cover childcare costs? <input type="checkbox"/> yes <input type="checkbox"/> no If you require childcare, you must submit a <b>Childcare Confirmation form</b> . Forms are located at <a href="http://www.advancingfutures.gov.ab.ca">www.advancingfutures.gov.ab.ca</a> .		
1. Are your children currently covered under a health benefit plan?	<input type="checkbox"/> yes <input type="checkbox"/> no	If "yes" to <b>Question 1</b> , complete the chart below.
2. Do your children have Registered Status under the Indian Act?	<input type="checkbox"/> yes <input type="checkbox"/> no	
name of insurer		

▶ please ensure all sections on this page are completed ▶

### SECTION 3: RESIDENCE AND CONTACT INFORMATION

Unit #	mailing address			city
province	postal code	main phone number (    )	other phone number (    )	
** e-mail is required. This is our main way of contacting you				
How long have you lived at the address above?		<input type="checkbox"/> If less than three months, please explain why you have recently moved:		
<input type="checkbox"/> over a year <input type="checkbox"/> six months to one year <input type="checkbox"/> three months to six months				

### SECTION 4: EDUCATIONAL INFORMATION

Term(s) applying for: <input type="checkbox"/> fall <input type="checkbox"/> winter <input type="checkbox"/> spring <input type="checkbox"/> summer					
school name		campus location		program type: <input type="checkbox"/> certificate <input type="checkbox"/> diploma <input type="checkbox"/> degree <input type="checkbox"/> trade	
delivery method		<input type="checkbox"/> in-class <input type="checkbox"/> online <input type="checkbox"/> distance <input type="checkbox"/> blended			
program of study		when do you start your program? (YY/MM)		length of program <input type="checkbox"/> weeks <input type="checkbox"/> months <input type="checkbox"/> years	
		when will your program be done? (YY/MM)		your year in the program: <input type="checkbox"/> first <input type="checkbox"/> third <input type="checkbox"/> second <input type="checkbox"/> fourth	
your program status with your school*		attending		academic year starts (YY/MM/DD)	
<input type="checkbox"/> applied <input type="checkbox"/> conditionally accepted <input type="checkbox"/> accepted		<input type="checkbox"/> full-time <input type="checkbox"/> part-time		academic year ends (YY/MM/DD)	
student I.D. number					
COSTS**	tuition and mandatory fees	cost of mandatory books	cost of mandatory supplies	fees for on-campus residence	number of months living in residence

\*Please include a copy of your confirmation of enrollment, conditional acceptance, or acceptance from your school (confirmation should include tuition costs, as well as the courses you are enrolled in).

\*\*Proof of your tuition and mandatory book and supply fees must be provided. Please submit a letter from your school, or a copy or printout of your student account, or confirmation from the school's website as confirmation. Provide a list of any mandatory supplies and which course they are for. **If you do not have this information when applying, please attach a note indicating when you will forward the missing information to Advancing Futures.**

### SECTION 5: LEARNING DISABILITIES

The information you provide regarding learning disabilities will not affect your bursary funding. This information will be used to link you with supports you may need to access through your school to be successful.	
Have you ever been diagnosed with a learning disability? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> I don't recall	
What type of learning disability were you diagnosed with?	
When was your last assessment completed?	
Are you currently receiving support from your institution for your learning disability? <input type="checkbox"/> yes <input type="checkbox"/> no	

▶    ▶    **please ensure all sections on this page are completed**    ▶    ▶

## SECTION 6: CHECK-IN

**You may write your answers here or type them on a separate page, whichever you prefer.**

1. What are your goals for the upcoming year? How will you achieve your goals and what supports do you think you may need to achieve them?
_____
_____
_____
_____
2. Is your career plan still the same as you outlined in your previous application?
_____
_____
_____
_____
3. What are your long term career goals?
_____
_____
_____
_____
4. Tell us how your schooling will help you with your future long term career goals?
_____
_____
_____
_____

## SECTION 7: TRANSPORTATION


Does your institution provide you with a UPASS? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not sure
If yes, are you eligible to receive a UPASS? <input type="checkbox"/> yes <input type="checkbox"/> no
If no to either of the above, is there public transportation in your town? <input type="checkbox"/> yes <input type="checkbox"/> no *
If yes, what is the cost of a monthly bus pass?

**\* If your community does not have public transportation available, you will be automatically eligible for the transportation amount.**

▶ ▶ please ensure all sections on this page are completed ▶ ▶

## SECTION 8: SUPPORTS

It can be unlawful to receive multiple sources of government funding, including Student Loans. In order to avoid any potential penalties as a result of receiving additional assistance from this bursary, please ensure this section is completed accurately. False information may result in the loss of the *Advancing Futures* bursary.

Do you have a case worker or youth worker? <input type="checkbox"/> yes <input type="checkbox"/> no			
Name: 		Phone #	
Have you applied for or are you receiving other financial assistance? * <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Financial assistance includes loans and subsidies through sources including, but not limited to, Alberta Works, Assured Income for the Severely Handicapped (AISH), Persons with Developmental Disabilities (PDD), Employment Insurance (EI), First Nation Funding, Supported Independent Living (SIL), Student Finance, or Child and Family Services.</i>			
type of assistance (e.g., loan, bursary, scholarship, assistance)	status of funding <input type="checkbox"/> applied for <input type="checkbox"/> currently receiving <input type="checkbox"/> approved for	payment start date (YYYY/MM/DD)	payment end date (YYYY/MM/DD)
amount per month \$	form of payment (e.g. cheque, direct deposit)	name of agency or organization that supplies the funding (e.g., AISH, EI, SIL)	
caseworker's name		phone number for caseworker or organization	

**\*If you receive financial assistance *Advancing Futures* requires a letter from the department or agency providing you with such assistance. This letter must indicate the end date of their services, including the month in which you will receive your final payment.**

## SECTION 9: SUPPORTING DOCUMENTS. Submit ALL of the following with your application:

<input type="checkbox"/> a copy of transcripts for courses taken in the previous academic year	
Obtain from your school (see box at right) and submit the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> proof of registration or enrolment</li> <li><input type="checkbox"/> tuition costs (general or student specific)</li> <li><input type="checkbox"/> cost of <i>mandatory</i> books and supplies (general or student specific)</li> <li><input type="checkbox"/> if you are <b>upgrading</b>, please provide your upgrading plan and program prerequisites</li> <li><input type="checkbox"/> a list of the courses you are enrolled in*</li> </ul> <p><b>*If you do not have your course list at the time you apply, attach a note indicating when you will forward the missing information to <i>Advancing Futures</i>.</b></p>	Each of these must be documented either by <ul style="list-style-type: none"> <li>• a letter from your school</li> <li>• a copy or printout of your student account</li> <li>• confirmation from the school's website</li> </ul>
<input type="checkbox"/> (if your banking information has changed) a signed and dated direct deposit form.	
<input type="checkbox"/> a letter from any department or agency providing you with funding (if applicable)	
<input type="checkbox"/> childcare form (if applicable)	
<input type="checkbox"/> birth certificate for children living with you (if not previously provided)	
<input type="checkbox"/> Duke & Duchess of Cambridge Scholarship Application	
<input type="checkbox"/> pages 1-5 of the completed <i>Advancing Futures</i> Bursary application. <b>BE SURE TO SIGN AND DATE SECTION 9 on page 5!</b>	

▶▶▶ please ensure all sections on this page are completed ▶▶▶▶

## SECTION 9: DECLARATION AND CONSENT

**Please read and sign:** The information that I have provided in this application is true, accurate and complete. I am aware that providing incomplete or false information can be considered fraud and will affect my ability to access future funding and may also result in criminal charges. I authorize Human Services, other government departments, and the school I am or will be attending to share my student information and information in relation to additional sources of funding I am receiving, for the purpose of determining and verifying eligibility for, and general administration of, the award for which I have applied. I authorize *Advancing Futures* to contact my reference and other support systems if needed. This information will be used only for the management of the *Advancing Futures* award.

**I understand that bursary payments received from *Advancing Futures* MAY BE TAXABLE. (For more information, contact Canada Revenue Agency at 1-800-959-8281.)**

signature	print name	Today's date (YYYY-MM-DD)
-----------	------------	---------------------------

*The collection of personal information on this form is authorized under section 8(1) of the Government Organization Act and is managed in compliance with the Freedom of Information and Protection of Privacy Act. Any questions regarding the collection and use of your personal information can be addressed to Employment and Financial Supports, Advancing Futures Bursary.*

## IMPORTANT REMINDERS

**Applications to attend a post-secondary school at any time during the upcoming academic year must be received on or before June 1, October 1 or February 1.**

All sections of the application form must be completed before it can be reviewed. Applications received **AFTER** the application deadline will **NOT** be eligible for funding. Incomplete applications will be returned and not processed. The personal information collected on this form will be used to review your eligibility for the *Advancing Futures* bursary and the Alberta Adult Health Benefit program.

Completed application packages can be faxed to (780) 644-6905 or mailed to

*Advancing Futures* Bursary Program  
3rd Floor, Sterling Place  
9940 – 106 Street  
Edmonton, Alberta T5K 2N2

## I'VE SUBMITTED MY APPLICATION. NOW WHAT?

Provided that you have submitted a complete application (with all of the items on the page 4 checklist included) these are the next steps:

1. Your application will be reviewed and graded by your Program Coordinator.
2. Based on the results of that review you will either be conditionally approved or contacted directly by your Program Coordinator to address missing or incomplete items.
3. You will receive a conditional approval letter in the mail that outlines what you must do to have your application approved.
4. Once you have completed all of the required tasks outlined in your conditional approval letter and notified your Program Coordinator, your award will be approved.
5. You will receive an award approval letter in the mail confirming the details of your funding. Your school will also be notified of your sponsorship.

 Alberta Government

▶ please ensure all sections on this page are completed ▶