

COVID 19 Emergency Assistance Application

Please answer all questions fully. Incomplete applications may not qualify for Emergency assistance.

Students who are in attendance in the CNC Spring 2020 semester (or current Trades Foundations) will be considered for funding. All applications are adjudicated to determine eligibility. Students must be in good standing with all college departments in order to be considered eligible for funding.

The College of New Caledonia complies with the Freedom of Information and Protection of Privacy Act. The information provided will be used solely to determine eligibility for emergency funding and for no other purpose.

Full Name:	Last	Middle Initial	First
Student Number:	Date of Birth: (yyyy/mm/dd)		
Address:			
Address:	Postal Code		
Phone Number:			
E-mail Address:	Full time ____ Part Time ____ Adult Upgrading ____		
Program/semester	Trades: Foundations ____ Apprenticeship ____		
CNC campus:	PG ____ Quesnel ____ Mackenzie ____ Lakes ____ Vanderhoof ____ Fort St. James ____		

Note: Your Social Insurance Number will be requested if not already uploaded into your student record.

Canadian citizen? Yes ____ No ____

BC resident for 12 continuous months (excluding study period)? Yes ____ No ____

Self-identified person of Aboriginal ancestry? Yes ____ No ____

____ First Nations ____ Metis ____ Inuit

Student with a documented permanent disability Yes ____ No ____

International Student? Yes ____ No ____

Living Arrangements:

Check one:	
STUDENT living with parent(s)	
STUDENT living on own	
STUDENT w' one dependent (18 or under)	
STUDENT w' more than one dependent. How many?	

Please describe how the current Covid-19 pandemic has caused a need for financial assistance:

Are you currently working? : Yes ___ No ___ Not working any longer due to Covid-19 ___

Are you currently receiving a StudentAid BC or other provincial loan for the spring 2020 semester? _____

Average MONTHLY EXPENSES

Average MONTHLY INCOME: for Spring 2020 semester

TYPE	AMOUNT		TYPE	AMOUNT
Housing– Rent/Mortgage			Employment/Income	
Utilities (phone, hydro, cable)			BC Benefits: EI/WCB/Income Assistance	
Food			Sponsorship/WorkBC	
Debt Payment			Spouse’s Income	
Transportation (car, insurance, gas)			Money from parent(s)/family	
Medical/Dental			OTHER (describe)	
Daycare/babysitting				
OTHER: (describe)				
TOTAL			TOTAL	

Students receiving accumulative taxable benefits from CNC in the amount of \$500 or more in a calendar year, will be issued a T4A for income tax purposes.

I certify that the information submitted is true and correct to the best of my knowledge. I understand any misrepresentation of this information may result in me having to pay back any funds I receive.

Student’s Signature: _____ Dated: _____