

### WHAT IS THE PROVINCIAL TUITION WAIVER PROGRAM?

The program waives tuition and mandatory fees for full-time and part-time B.C. post-secondary students who are studying towards a certificate, diploma, or undergraduate degree who are former youth in care between the ages of 19 and up to their 27th birthday.

### YOU ARE ELIGIBLE FOR THE PROGRAM IF YOU

- are a resident of B.C.; or
- have been placed in another province under a Ministry of Children and Family Development or Delegated Aboriginal Agency Interprovincial Placement Agreement;
- are studying full- or part-time at a B.C. public post-secondary institution, the Native Education College or one of the ten approved trades training providers<sup>1</sup>;
- are between the ages of 19 to 26 years of age (inclusive); or
- are 17 or 18 years of age, have graduated from high school and are no longer in the care of the Ministry of Children and Family Development; and
- were formerly in any B.C. Ministry of Children and Family Development or Delegated Aboriginal Agency Legal Status,<sup>2</sup> or the Ministry of Social Development and Poverty Reduction Child in Home of Relative program for at least 24 months or 730 days (consecutive or accumulated in any combination).



#### <sup>1</sup>Approved Trades Training Providers include:

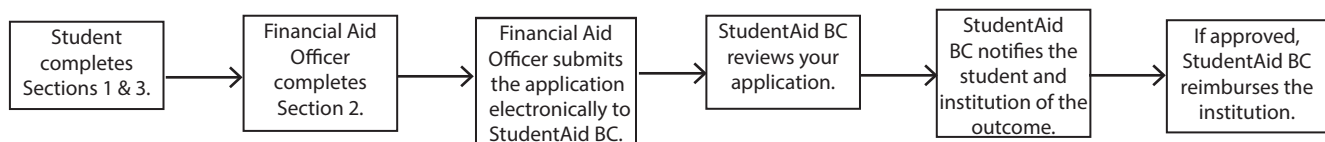
- Boilermaker Training Centre
- Construction and Specialized Workers
- D.C. 38 Joint Trade Society
- Electrical Joint Training Committee
- Floorlayers Union
- IUOE Local 115 Training Association
- Piles Drivers Local 2404
- Piping Industry Apprenticeship Board
- Sheet Metal Workers Training Centre Society
- Trowel Trades Training Association

#### <sup>2</sup>Legal Statutes include:

- Adoption
- Continuing Custody Order with a Director
- Extended Family Plan
- Interim Custody Order with a Director
- Interim Custody Order with person other than a parent
- Permanent Transfer of Custody Order with person other than a parent
- Special Needs Agreement
- Temporary Custody Order
- Temporary Transfer of Custody Order
- Under the Guardianship of a Director - *Adoptions Act*
- Under the Guardianship of a Director - *Infants Act*
- Voluntary Care Agreement
- Youth Agreement

### APPLICATION INSTRUCTIONS

1. Complete Sections 1 and 3.
2. Have your Financial Aid Officer at your post-secondary institution complete Section 2.
3. Your Financial Aid Officer submits the completed application to [tuitionwaiver@gov.bc.ca](mailto:tuitionwaiver@gov.bc.ca).



Processing takes approximately two weeks. It may take up to six weeks to receive a response.

**APPLICATION FORM BEGINS ON PAGE 2.**



SECTION 1 - PERSONAL INFORMATION

List all known names, including full legal names. Only listed names can be searched to qualify you.

(1) SOCIAL INSURANCE NUMBER

Grid for Social Insurance Number with 9 cells, some shaded black.

(2) LEGAL LAST NAME

Horizontal line for Legal Last Name

(3) LEGAL FIRST NAME

Horizontal line for Legal First Name

(4) LEGAL MIDDLE NAME

Horizontal line for Legal Middle Name

(5) LIST ALL OTHER KNOWN NAME(S)

Horizontal line for Other Known Name(s)

(6) EMAIL ADDRESS (you will be contacted via email with application updates)

Horizontal line for Email Address

(12) Have you resided in B.C. for at least 12 months? YES NO

(13) Do you identify yourself as an Aboriginal person, that is First Nations, Métis or Inuit? YES NO

(14) If yes, do you identify as: FIRST NATIONS MÉTIS INUIT

(7) DATE OF BIRTH (DD/MMM/YY)

Grid for Date of Birth with 6 cells, some shaded black.

(8) GENDER

FEMALE

MALE

OTHER Please specify: \_\_\_\_\_

(9) CITIZENSHIP STATUS

CANADIAN CITIZEN

PERMANENT RESIDENT

PROTECTED PERSON

OTHER

(10) STUDENT NUMBER

Grid for Student Number with 10 cells.

(11) PERSONAL EDUCATION NUMBER

Grid for Personal Education Number with 10 cells.

SECTION 2 - STUDY INFORMATION - TO BE COMPLETED BY YOUR INSTITUTION

POST-SECONDARY INSTITUTION NAME \_\_\_\_\_

POST-SECONDARY INSTITUTION ADDRESS \_\_\_\_\_

STUDY PERIOD START DATE \_\_\_\_\_

PROGRAM NAME/CREDENTIAL \_\_\_\_\_

APPROXIMATE LENGTH OF PROGRAM (IN WEEKS, MONTHS OR YEARS) \_\_\_\_\_

APPROXIMATE TOTAL PROGRAM COSTS:

TUITION \$ \_\_\_\_\_

MANDATORY ADMINISTRATIVE FEES \$ \_\_\_\_\_

X \_\_\_\_\_ FINANCIAL AID OFFICER SIGNATURE

PRINT NAME

DATE SIGNED (DD-MMM-YYYY)



SECTION 3 - DECLARATION

Please read and sign.

I am applying for funding to assist with my education under the Provincial Tuition Waiver Program.

By signing my name on this application form:

- 1. I certify that all information is complete and accurate and I have not altered or added to any of the Provincial Tuition Waiver Program application and/or questions.
2. (a) I understand that (INSTITUTION NAME ...) will disclose that I want to access the Provincial Tuition Waiver Program to the Ministry of Advanced Education and Skills Training (AEST) who will then request information from the Ministry of Children and Family Development (MCFD) or Delegated Aboriginal Agency in order to confirm my status as a former child/youth in care or my status in an out of care order/agreement as defined by the Child, Family and Community Service Act; and/or the Ministry of Social Development and Poverty Reduction (SDPR) in order to confirm my status in the Child of Home of Relative Program. This consent takes effect when I sign this declaration.
(b) I understand that MCFD and/or SDPR will release the information as it relates to my eligibility for the Provincial Tuition Waiver Program to AEST, who provides funding for this program. I understand that this information will be used to determine my eligibility for the Provincial Tuition Waiver Program. This consent takes effect when I sign this declaration.

Collection Notice and Use of Information

Your personal information is collected and disclosed by the post-secondary institution you are attending, to the Ministry of Advanced Education and Skills Training, the Ministry of Children and Family Development, and the Ministry of Social Development and Poverty Reduction under sections 26(c), 26(e), 27(1)(a)(i) and 27(1)(c)(iii) of the Freedom of Information and Protection of Privacy Act (FOIPPA) in order to provide you a financial benefit. The information you submit may also be used for research, planning and evaluation related to this program. If you have any questions about the collection, use or disclosure of this information, you may contact: Director, Tuition Waiver Program, Ministry of Advanced Education and Skills Training, PO Box 9173, Stn Prov Govt, Victoria, BC V8W 9H7, Phone: (778) 698-9877.

X \_\_\_\_\_
STUDENT SIGNATURE PRINT NAME DATE SIGNED (DD-MMM-YYYY)