

Ditidaht Education Department

Report Card Incentive Application Form

Personal Information

Student Name (last, first, middle initial):

Home Address:

City:

Province:

Postal Code:

Home Phone:

Contact Number:

Status Card # 66200-

Expiry Date:

Education Record

High School (Name, City, Province):

*****DATE Report Card was ISSUED*****: _____

Date set for Graduation:

Education and Career Plans: What are your goals?

Please write a brief summary in the space provided or list of what you would like to strive for.

Please Read and Sign Below

All applications are subject to review and approval by the Education Manager. By signing below you give the Ditidaht First Nation Education Liaison permission to access your academic information which includes your progress and attendance.

LETTER GRADE	# Of Grades Received	Total	
A = \$50		\$	
B = \$25		\$	
C+ = \$12.50		\$	Grand Total
C = \$7.5		\$	\$ _____
C - = \$5		\$	

Community Services Manager APPROVAL _____
Code Number- 71000-1520

Maximum allowable eligible to apply per report card is for \$ 260. ***Within 10 working days after report cards are issued.***

Student Signature:

Date:

Parent or Guardian Signature:

Date:

P.O. Box 340 Port Alberni, B.C. V9Y-7M8, Phone: 250-745-3331 or 1-888-454-0022 Fax: 250-745-3741