



# YOUTH IN CARE TUITION WAIVER PROGRAM APPLICATION

## Student Financial Aid and Awards

3700 Willingdon Avenue, Burnaby, BC V5G 3H2

T 604.432.8555 F 604.454.0941 W [bcit.ca/finaid](http://bcit.ca/finaid)

Building SW1-2132

### DESCRIPTION

The BCIT Youth in Care Tuition Waiver Program provides up to \$5,000 to each of five (5) students, who grew up in the BC care system, and are currently enrolled in, or students accepted to enter a full-time BCIT program (excluding Apprenticeship programs). Tuition waivers apply only toward the completion of a **first** certificate or diploma at BCIT.

### WHAT DOES THE TUITION WAIVER COVER?

The tuition waiver will be used to cover costs of program tuition, BCIT student association activity and health & dental fees, other fees and lab, material or certification fees.

### WHO IS ELIGIBLE?

To be eligible for the BCIT Youth in Care Tuition Waiver Program individuals must be a resident of BC who is living, or has lived a significant part of their life, as a youth in care in BC as defined by the Child, Family and Community Service Act (CFCSA):

- a Continuing Custody Order pursuant to sections 41 (1) (d), 42.2 (4) (d) or (7) or 49 (4), (5) or 10 (a) for a minimum of one year,
- an Agreement with Youth pursuant to section 12.2 of the Act,
- a Transfer of Custody Order pursuant to section 54.1 of the Act.

If applicants are unsure whether they meet any of the above criteria, they should contact their former social worker, any Ministry of Children and Family Development office or any delegated Aboriginal agency for clarification.

In addition, applicants must meet the following criteria:

- Be at least 18 years of age.
- Be in receipt of a BCIT offer of acceptance into a full-time program.
- Be in need of financial assistance (priority will be given to students receiving government student loan and/or grant funding through the province of BC).
- Meet with an Advisor in the Student Financial Aid and Awards department.
- Complete and sign this BCIT Youth in Care Tuition Waiver Program Application form including the Declaration and Release of Information Consent form.

Upon applicant consent, BCIT will verify the applicant's eligibility with the Ministry of Children and Family Development office or any delegated Aboriginal agency.

If more than five applications are received, tuition waivers will be prioritized and disbursed based on individual financial need.

Contact: Stephanie Williams, phone: 604.456.8136; email: [stephanie\\_williams@bcit.ca](mailto:stephanie_williams@bcit.ca).

**Incomplete applications will not be considered. Return completed applications to:**

**Student Financial Aid and Awards**  
**BC Institute of Technology**  
3700 Willingdon Avenue, SW1-2132  
Burnaby, BC V5G 3H2

Hours: 0830 – 1600 Monday to Friday



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### PERSONAL INFORMATION

BCIT ID		Social Insurance Number <i>(required for income tax purposes)</i>	
Program Name			
<input type="checkbox"/> Mr.	Last Name	First Name	Middle Name
<input type="checkbox"/> Ms.			
Date of Birth <i>(yyyy/mm/dd)</i>		Citizenship <input type="radio"/> Canadian Citizen <input type="radio"/> Permanent Resident	
Do you have a permanent disability <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you an Aboriginal Canadian <input type="checkbox"/> Yes <input type="checkbox"/> No			
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Single Parent <input type="checkbox"/> Married, no children (include common-law) <input type="checkbox"/> Married, with children (include common-law)			
List dependent children in your custody			
	Name	Age	Name Age
Name	Age	Name	Age
Housing during this academic period <input type="checkbox"/> Residence you own <input type="checkbox"/> Rental unit you rent <input type="checkbox"/> Live with parents <input type="checkbox"/> BCIT Maquinna Residence <input type="checkbox"/> Live with parents/foster parents			
Apt.	Street Address		
City	Prov.	Postal Code	Phone No.
Email			

### FOR OFFICE USE ONLY

Total Awarded

**BUDGET**

Calculate your budget for your current program

Date classes started current academic term

Y	Y	Y	Y	M	M
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Date classes will end

Y	Y	Y	Y	M	M
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equals (A)  Number of months

It is highly recommended that you attach a letter to outline your particular financial circumstances, include amount(s) of exceptional expenses and explain why you require additional funds.

MONTHLY EXPENSES	
Housing (rent or mortgage)	\$
Groceries (food, cleaning supplies)	
Utilities (heat, light, phone, cable)	
Transportation (bus pass or car expenses)	
Medical/dental (premiums, prescriptions)	
Personal care/miscellaneous	
Minimum monthly credit card payment	
Loan payment (specify)	
Child care (include subsidy amount)	
Alimony you pay (explain in a letter)	
Child support you pay (explain in a letter)	
Property taxes (pro-rated monthly)	
House insurance (pro-rated monthly)	
Car insurance (pro-rated monthly)	
Other (specify)	
Monthly total (B)	\$

MONTHLY INCOME	
Your part-time work take home pay	\$
Spouse's work take home pay	
Employment Insurance income	
Sponsor/agency income (HRSDC, WCB, band, etc.)	
Canada Child Tax Credit (CCTC) and BC Family Bonus	
Universal Child Care Benefit (UCCB)	
Daycare subsidy you receive	
Pension (CPP) or disability income	
Asset income (rental, interest)	
Alimony or child support you receive	
Other (specify)	
Monthly total (F)	\$

Enter total monthly expenses (B)	\$
Multiply by your number of months (see box A)	
Equals academic period total B x A = (C)	\$

Enter total monthly income (F)	\$
Multiply by number of months (see box A)	
Equals academic period total F x A = (G)	\$

OTHER ONE-TIME EXPENSES	
Tuition and fees for current academic term	\$
Books, materials, supplies	
Other (specify)	
One-time Expenses Total (D)	\$
Total all EXPENSES for this academic period (box C + box D = E)	(E) \$

OTHER INCOME	
Parent or family contributions	
Your Government Student Loans and Grants	
Bursaries, scholarships, etc.	
Spouse's student assistance and bursaries (if a student this term)	
Sponsored tuition and books	
Other (specify) e.g. YEAF	
Other Income Total (H)	\$
Total all INCOME for this academic period (box G + box H = I)	(I) \$

My request: (expenses – income = request)

EXPENSES (box E) \$  minus INCOME (box I) \$  equals REQUEST \$

BCIT collects your personal information including your contact information, educational and financial information for the purpose of awarding bursaries to eligible students.

**DECLARATION:** I understand that I am applying for funding based on financial need, and that by signing below it means:

I certify that the information I have provided on this application is complete and accurate.

- I am and will continue to be a full-time student for the academic period stated in this application.
- If I am awarded a bursary, monies owing to BCIT will be deducted first and the remainder, if any, will be mailed to me.
- I consent to THE BCIT STUDENT FINANCIAL AID AND AWARDS OFFICE to release to the BCIT Foundation and the donor of my bursary award the following information: address, telephone number, items listed in the Personal Information section, and academic standing.

Signature <b>YOU MUST SIGN HERE!</b>	Date
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**YOUTH IN CARE  
TUITION WAIVER PROGRAM APPLICATION  
DECLARATION AND RELEASE OF INFORMATION CONSENT**

**Student Financial Aid and Awards**  
3700 Willingdon Avenue, Burnaby, BC V5G 3H2  
T 604.432.8555 F 604.454.0941  
Building SW1-2132

I, \_\_\_\_\_,  
(First name) Middle Name Last name

born on \_\_\_\_\_  
(yyyy/mm/dd)

hereby authorize the exchange of information between the Ministry for Children and Family Development and the BC Institute of Technology as it relates to the Institute’s Tuition Waiver Program, and to records such as:

- Notice that I am an applicant and/or recipient of the tuition waiver from the above institution;
- Educational information submitted to the Institute as part of the Tuition Waiver intake process; and
- Confirmation of my eligibility for the Tuition Waiver Program as a current or former youth in care as defined by the Children, Family and Community Services Act.

I understand this information will be used to determine eligibility for the BCIT Youth in Care Tuition Waiver Program, based on the below criterion:

- Student must be a resident of British Columbia who is living or has lived as a youth in care in British Columbia under one of the following conditions as defined by the Child, Family and Community Service Act (CFCSA):
  - A Continuing Custody Order pursuant to sections 41 (1) (d), 42.2 (4) (d) or (7) or 49 (4), (5) or 10 (a) of the Act for a minimum of one year;
  - An Agreement with Youth pursuant to section 12.2 of the Act;
  - Transfer of Custody Order pursuant to section 54.1 of the Act.

This consent is valid for one year from the date signed.

Student Signature	Date
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