



FCC Indigenous Student Empowerment Fund Application Form

The FCC Indigenous Student Empowerment Fund was established to provide financial assistance to Indigenous undergraduate students with a range of needs and support them to succeed in their academic and career goals. The bursary will be awarded in the Fall and Winter semesters to University of Regina Indigenous undergraduate students who meet the following criteria:

- Pursuing a degree in either the Faculty of Arts, Faculty of Business, or Faculty of Science (Computer Science, Data Science or Statistics and Economics);
- Minimum Undergraduate Grade Point Average (UGPA) of 65%;
- Registered and remains registered in a minimum of 9 credit hours in the semester the award is presented;
- Student is self-declared Indigenous;
- Students must complete a written statement (up to 350 words) detailing member status or nation and highlighting the impact of the award on their personal growth; and
- Demonstrates financial need.

Note: Recipients of the award must consent to their contact information being shared with the donor.

Applications for the scholarships are available through the ta-tawâw Student Centre.

INSTRUCTIONS

- Complete all sections. Only completed applications will be considered, assistance will be provided by the ta-tawâw Student Center if needed.
- Mail or deliver completed application to:
ta-tawâw Student Centre
University of Regina
Research & Innovation Centre 108
3737 Wascana Parkway
Regina, SK S4S 0A2
Fax: (306) 337.3158
E-mail: Tatawaw.Student.Centre@uregina.ca
- If there are any questions, you may be asked to meet with a ta-tawâw Student Centre staff member.

Student Personal Information

LAST NAME: _____ FIRST NAME: _____ S.I.N: _____

ADDRESS: _____ CITY: _____ PROVINCE: _____

POSTAL CODE: _____ PHONE: _____ CELL: _____

STUDENT ID NUMBER: _____ EMAIL: _____

INDIGENOUS STATUS

The FCC Indigenous Student Empowerment Fund is for students of Indigenous ancestry. Please self-declare below;

- ☐ I am of Indigenous ancestry; Status Indian, Non-Status Indian, Métis, or Inuit.



DEPENDENTS

Please indicate the number of dependents that are in your care _____.

Student Program Information

FACULTY/PROGRAM: _____ CAMPUS: _____

CURRENT REGISTERED CREDIT HOURS: _____ UGPA %: _____

Financial Requirement

Have you received emergency financial support from a service area on campus or any federated college this academic year?

No: _____ Yes: _____

Total amount of bursary funds requested: \$ _____

Provide details on what you plan to use the bursary funds for:

Amount Requested	Description
\$	
\$	
\$	
\$	
\$	

Purpose of Request

Please explain, in as much detail as possible, the circumstances that have led to your bursary application.



Financial Disclosure

Provide the following information to the best of your knowledge:

(please attach a page to your application if you would like to make additional comments about your financial disclosure)

SEMESTER INCOME (please provide estimated totals for all 4 months – for example from September to December for Fall)	SEMESTER EXPENSES (please provide estimated totals for all 4 months – for example from September to December for Fall)
Student Loan (tuition & living - 4 months): \$ _____	Tuition: \$ _____
Scholarship/Bursary: \$ _____	Books: \$ _____
Third-Party assistance (ie: sponsorship): \$ _____	Rent (4 months): \$ _____
Employment (4 months): \$ _____	Utilities (4 months): \$ _____
Other (Explain): \$ _____	Food (4 months): \$ _____
	Bus/Car/Gas (4 months): \$ _____
	Child Care (4 months): \$ _____
Semester Income Total: \$ _____	Other (Explain): \$ _____
	Semester Expenses Total: \$ _____

Student Testimonial

How will this funding help you succeed in your studies?



Options for Funding

As available funding is outweighed by student need, should the FCC Indigenous Student Empowerment Fund be unable to help you at this time, what other options might you explore for funding?

Conditions of Acceptance

Students' personal information is collected on the application for the purposes of administration of the bursary and will be shared with members of the selection committee. The recipient name, program of study, amount of funding received and student testimonial will be disclosed to the donor and may be published in promotional materials. By applying for the bursary, students consent to the use and disclosure of their personal information as described above.

- ☐ I have read and agree to the Conditions of Acceptance.
- ☐ I declare that the information I have given is true and that I have answered all questions applicable to me.
- ☐ I agree to provide receipts (where applicable) and return any unspent money to the University of Regina.
- ☐ I acknowledge that should I be awarded this funding, that I must remain a registered student in a minimum of 9 U of R credit hours in addition to meeting the other requirements for this award for the entire duration of the semester.
- ☐ I acknowledge that should I be awarded this funding, my contact information will be shared with the donor.

STUDENT SIGNATURE: _____ DATE: _____