

**FLYING DUST FIRST NATION PSSSP
Continuing Studies Notification Form**

Please submit this form one month **before the end** of the current term/semester if you plan on continuing your studies into the next term/semester. This is important as we have an active Wait List for PSSSP funding.

NAME: _____ STUDENT #: _____

Institute attending and Location: _____

Program: _____

Length of program: _____ Current year of studies: _____

This form is for the upcoming term/semester:

Winter 20____ Spring 20____ Summer 20____ Fall 20____

List classes for Spring and Summer: _____

(NOTE: Only required classes will be eligible for Spring/Summer funding; not electives)

Will you be doing an internship/practicum during this next term/semester? NO YES

What is the length of the internship/practicum? _____

Are you moving for your internship/practicum? NO YES

Has your address changed since the last term? NO YES (please provide new address)

****DOCUMENTATION REQUIRED:**

1. Class Registration for next term/semester
2. Transcripts (once official marks have been posted)
3. Tracking sheet/Program plan that is updated to the most recent term
4. Any documentation for change in dependents

Student Signature

Date

Date application received in office: _____