

## Children's School Supplies Application

Name of Parent/Legal Guardian: \_\_\_\_\_

Address of Parent/Legal Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name	Date of Birth	Indian Status #	School Name	Grade	Amount

Funding Amount: Kindergarten-Grade 5 \$50.00 / Grade 6-12 \$65.00

Total Amount requested: \_\_\_\_\_

Deposit to TD Canada Trust Account (if no TD account then cheque will be mailed to above address):

Intuition # \_\_\_\_\_ Branch # \_\_\_\_\_ Account # \_\_\_\_\_

Please return form to:

White River First Nation Education Department – CELC P.O Box 2 Beaver Creek, YT Y0B 1A0	Phone : 867-862-7802 (Message)  Fax: 867-862-7806  Email: wrfn.celc@outlook.com
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