

Indigenous Support for Student Learning Program (SSLP)

The Indigenous Support for Student Learning Program (SSLP) is a time-limited project for Indigenous students who have limited financial resources, including those living with disabilities. We are accepting applications for students who are enrolled in Formal education (either online, remote, or on-site learning) to receive a laptop and accessories.

Goal:

 Assist Indigenous students' continued participation and success in their education, and eventually, in their future employment

Am I Eligible?

- Applicants must be enrolled in Formal education at any level from kindergarten to post-secondary OR taking courses through an accredited institution, AND be actively attending
- Applicants must be of Indigenous ancestry
- Applicants must not have received/be receiving any other support for equipment from Nation, community, or other organization/program
- Applicants must be a Canadian resident
- Applicants must be low-income OR
- Applicants identify as living with a disability AND be low-income

"Persons with disabilities," for the purposes of student financial aid, is defined as "those who have long-term physical, mental, intellectual or sensory impairments which in the interaction with various barriers may hinder their full and effective participation in society on an equal basis with others" ¹

Acceptable Documentation to demonstrate financial need (for applicant or parent/legal guardian)

Please include proof of/an approval statement from any one of the following:

- Federal or provincial/territorial Student Loan
- Any Federal or provincial/territorial Income Assistance
- Any Federal or provincial/territorial Disability Assistance
- Canada Child Benefit (parent or legal guardian)
- Most recent Income Tax Notice of Assessment prepared by Canada Revenue Agency (CRA)
- → If these options are not available and you meet all of the eligibility criteria, provide thoroughly describe your situation under Section 3 B (Demonstrate Financial Need)

All information in the applications must be fully completed for consideration (Sections 1-6). BCANDS will verify the applicant's enrolment, attendance (online, remote, or in-class), and financial need. BCANDS reserves the right to refuse any application and determine the level of support approved. BCANDS will prioritize approvals based on the information provided in the application, the demonstrated need, and the date received. Applicant's receiving support from their Nation, community, or another organization/program in relation to equipment (computers) for their ongoing participation in school may be deemed ineligible.

Applications will be accepted on an ongoing basis. Applications must be received by BCANDS no later than March 15th, 2021 for consideration. However, due to the limited financial resources available and high demand, we recommend that applicants submit their completed application as early as possible. Late applications will not be reviewed. Call for applications will be closed in event that the project's resources have been fully expended prior to the **March 15, 2021 deadline**. If you need assistance with the application or have questions, please contact us.

Please keep this page for your records.

¹ Definition from the United Nations Convention on the Rights of Persons with Disabilities





		Se	Ction	i i: Appilo	LdIIU		nation				
Full Name:									Date o		
Parent or Guardian	First			Last			M.	l.			
Name: (if applicable)											
	First			Last			M.	l.		(MM/DD/	YYYY)
for Equipment	Street Address									Apartment/Unit :	#
Distribution:	City/Town						Pro	vince		Postal Code	
Phone Number:					E	mail:					
Age: (any age is eligible)				Ger	nder:					
		Firs	t Natio	ons (Status)			Inui	it 「	٦		
How do you identi	y:						Mét	_	_ _		
		FIISU	Nations	(Non-Statu	15)		Met	15 _	_		
Are you living with	a disability?	YES	NO	→ If yes, please bridescribe y disability a its effects	our and						
Are you a Canadiar	Citizen?			YES	NO 						
				YES	NO	N.6	_				
Are you employed	while attendii	ng scho	ol?			→If ye	es: Fu	ll-time		Part-time	
		Sec	ction	2: Enrolr	nen	t Verifi	ication				
All information pro	vided in this s	ection	will be	verified by	вса	NDS.					
Name of School:					9	School Ac	ddress:				
Program Start Date (MM/DD/YYYY) (if ap						Full-time/ time Prog					
Program End Date	piicabie)•					Student II					
(MM/DD/YYYY) (if applicable):					(if applica						



Section 3: Eligibility Criteria

You must meet ALL of the following criteriverified.	ia to pr	oceed	and be considered	I for the SSLP. This information	n will be				
A) I confirm that I am an Indigenous student disability	with li	mited t	financial resources,	including those living with a					
	I confirm that I am an Indigenous student who is enrolled, and actively attends classes in a Formal educational institution (either online, onsite, or remotely)								
I confirm that I have not received other su (laptops/tablets) from another program o	e not received other support or similar funding for technology equipment								
Why are you applying for the BCANDS Sucurrent financial and educational situationability to participate in your education: (n, and	how tl	nis program and pro	ovided computer will improve y					
B) DEMONSTRATE FINANCIAL NE	ED:								
Please describe your limited financial means:									
Do you receive (select ALL that apply):				Benefit Name(s):					
Federal Income or Disability Assistance		NO	→If yes, indicate benefit name(s)						
Provincial/territorial Income or Disability Assistance		NO	→If yes, indicate benefit name(s)						
Are you a Parent/Guardian of a student receiving Income or Disability Assistance?	YES	NO	→If yes, indicate benefit name(s)						
Other means of financial assistance:									

INCLUDE DOCUMENTION TO DEMONSTRATE FINANCIAL NEED WITH APPLICATION

See Page 1 for list of Acceptable Documentation





Section 4: References

All information provided in this section will be verified by BCANDS. Contact information must be affiliated with your educational institution AND/OR community.

If possible, have your community OR school contact provide a signed letter (included) verifying the eligibility criteria, and you have not received other funding.

Admissions Contac	t at Educational Institution						
Full Name:		Position:					
Email:		Phone Number:					
Address:							
Community Staff C	OR Chief and Council Contact (if possible)					
Name of Indigenous Community:		Position:					
Full Name:		Phone Number:					
Email:							
Address:							
	Section 5: Equipme	ent Requirements					
The Support for Student Learning Program (SSLP) intends to maximize available funds and will prioritize applicants based on level of need for the available resources provided through the program.							
Please provide your software requests, though we cannot guarantee that you will receive your requests.							
Hardware	Laptop	☐ Wireless Mouse ☐	In-ear Headphones				
and software requests:	Other specialty software requiremen (e.g. screen reader, speech-to-text, dictation software, etc.)	ts:					



Section 6: Disclaimer and Signature

I authorize the release of information included in this application form to BCANDS for the purpose of eligibility verification for the student technology and resource funding.

I. I understand that:

- a) I am applying for technology equipment (computer and accessories) under the publicly-funded Support for Student Learning Program (SSLP)
- b) It is my responsibility to ensure that all of the information provided on and with this application is true and complete, and I have not made any false or misleading statements on this application.
- c) Incomplete or inaccurate information, or any attempt to access this funding by fraudulent means will result in my disqualification from the SSLP and related services.
- d) BCANDS reserves the right to refuse an application and to determine the level of support approved as determined through my provided information and described need.
- e) BCANDS may need to collect additional information about me to determine my eligibility for the SSLP or verify information provided in the application and related documentation.
- f) This program is dependent on available funding, and that BCANDS cannot ensure everyone in need receives adequate equipment and software.

II. If I am approved for the SSLP program:

- a) I understand that the provided equipment (computer and accessories) is for the intended purpose of enabling my continued and successful educational outcomes, and for eventual future employment.
- b) I will exercise due care of any and all items provided to me, and use them solely for their intended purpose. I will not install or have installed any software or hardware that could interfere with the equipment's functionality or intended purpose.
- c) I understand that BCANDS is not responsible for any additional expenses or services. All technological services provided through the SSLP will include a standard system software and are provided based on availability.
- d) I understand that any updates, repairs, additional software, subscriptions, or otherwise that are required are my sole responsibility. BCANDS will not provide ongoing costs associated with the provided equipment or software (e.g. Internet services, subscriptions, software, etc.).

I give BCANDS permission to contact myself, and the references provided in order to verify program eligibility:

Applicant Signature: X		Date:	
		(MM/DD/YY	/YY)
Parent/Guardian Signature:	X	Date:	
(if applicable)		(MM/DD/YY	/YY)

PLEASE EMAIL, MAIL, OR FAX YOUR APPLICATION TO BCANDS:

Email: sslp@bcands.bc.ca Mail: #6-1610 Island Highway **Fax:** 250-381-7312

Victoria, BC V9B 1H8





Section 7: Optional Additional Information

The information collected in this section will **NOT** be used towards your application approval process. It will be used for BCANDS' internal research and engagement purposes only.

Any information provided in this section will be collected anonymously.

Answering the questions in this section are optional, but we appreciate any information you are willing to provide!

1.	As an Indigenous student and/or Indigenous student with a disability (or parent/guardian), what are the biggest barriers to accessing and continuing your education? (i.e., access to buildings, discrimination and stereotypes, information technology, communication, outdoor spaces, transportation, etc.)						
2.	A) Has the COVID-school?	-19 pandemic crea	ited or enhanced ar	ny barriers that ma	ake it challenging to acce	ss or remain in	
Str	ongly Disagree	Disagree	Neutral	Agree	Strongly Agree		
r	B) If you agree, ho	ow so?					