



# Tłichq Student Support Packages

Tłichq Post-Secondary Support, Department of Client Services

P.O. Box #412, Behchokq, NT X0E0Y0

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Tłichq Ndek'áowó



Tłichq Government

**All sections of the application must be completed to be eligible for the Tłichq Student Support Package Pilot Program.**

Section A - Applicant Information			
Applicant Contact			
First Name		Last Name	
Email Address		Telephone #	
Address Information			
Address		Postal Code	
Town/City		Terr/Prov	
Preferred Method of Contact			
<input type="checkbox"/>	Phone	<input type="checkbox"/>	Email
<input type="checkbox"/>	Text	<input type="checkbox"/>	Other

Section B - Program Information			
Have You Applied for PSSSP/Top-Up/Bursary Funding?			
<input type="checkbox"/>	Yes – Approved	<input type="checkbox"/>	Yes – Pending
<input type="checkbox"/>	Yes – Denied	<input type="checkbox"/>	No - Denied
Program Details			
Institution		Program Name	
Start Date		End Date	
Student Type			
<input type="checkbox"/>	First Year	<input type="checkbox"/>	Returning Student
Semester(s) you will attend?			
<input type="checkbox"/>	Fall 2025 Semester (September to Dec)		
<input type="checkbox"/>	Winter 2026 Semester (January to April)		
<input type="checkbox"/>	Spring/Summer 2026 Semester (May to August)		

Section C – Package Information			
Which Upcoming Support Packages Are You Interested In?			
<input type="checkbox"/>	<b>Starter package (One per student)</b> Includes dish set, pots & pan set, food containers, first aid kits, cleaning supplies, & more!	<input type="checkbox"/>	<b>Winter 2026 support package (Feb/Mar)</b> More information will be available September 2025

_____	<b>Fall 2025 support package (Oct/Nov)</b> More information will be available January 2026.	_____	<b>Spring 2026 support package (Apr/May)</b> More information will be available May 2026.
<b>Delivery Method</b>			
_____	I will pick up my package in person at the Client Services Office in Behchoko.		
_____	I can pick up my package in person at the Tłıchǫ Government Office in my home community		
_____	Please ship my package to the mailing address above.		
_____	Please deliver in person		
<b>Do you have any allergies?</b>			
_____	Yes	_____	No
If “yes”, what are you allergic to?			
<b>Please let us know if you have any specific accessibility, cultural, or language needs we should consider when preparing your support package:</b>			
<b>Are you living alone? Or with family while attending school?</b>			
_____	Alone	_____	With Spouse
_____	With Family	_____	With Roommates
_____	Other		

<b>Section D – Follow up information</b>	
<b>Follow-Up Survey</b>	
_____	Please let us know if you have any specific accessibility, cultural, or language needs we should consider when preparing your support package:
_____	No, I do not wish to participate

<b>Section E – Signature</b>	
<b>Applicant Signature</b>	
Signature of Applicant	
Date (DD/MM/YYYY)	

**Completed applications can be sent to [Student.Services@tlicho.ca](mailto:Student.Services@tlicho.ca), faxed to (867)-392-6884, or visited the Tłıchǫ Government, Client Services Office in Behchokò, NT.**