

Part 4 – Graduation Celebration

Department of Client Services

PO Box #412, Behchokỳ, NT X0E0Y0 Tel: (867)-392-1700 • Fax: (867)-392-6884

Email: post.secondary@tlicho.ca • Website: www.tlicho.ca

Part 4 – Graduation Celebration, helps with graduation-related expenses, including travel.

Submit this form up to one calendar month prior to your completion of the program date.

A - Student Information – To be completed by Student			
		Student ID Nur	mber:
Email Address:		Phone #:	
iture:		Date (dd/mm/yy):	
Student, please note you must also submit your final transcripts as proof of successful completion of a program. You may be required to pay back the graduation celebration amount for non-completion of this requirement.			
- To be completed b	y Educa	ational Institution	
Educational Institution:		Program:	
Type of Program (please check one):			
Record of Achievement		License	Certificate
Degree		Masters	Doctorate
Other:			
	Date of Convocation Ceremony:		
Day/Month/ Year			Day/Month/ Year
Educational Institution contact information:			
Telephone:		ne:	Fax:
Title of School Official: Signature of School Official : Date:			Date:
	st also submit your final back the graduation ce To be completed b meck one): Record of Achieve Day/Month/ Year ct information:	ast also submit your final transcr back the graduation celebratio To be completed by Education Peck one): Record of Achievement Degree Day/Month/ Year Ct information: Telephore	Phone #: Date (dd/mm/st also submit your final transcripts as proof of succe back the graduation celebration amount for non-content of the program: To be completed by Educational Institution Program: Program: Degree

Once completed fax (867-392-6884) or email (post.secondary@tlicho.ca) to ONE Student Financial Support Program.