Hardship Bursary Form

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1. Student Information	
Student Name:	Student ID:

2. Academic Program Information		
Institution:	Program:	
Semester:	Academic Year:	☐ Proof of current enrolment attached

3. Description of Financial Hardship
Please describe the temporary financial hardship you are experiencing:
☐ Supporting documents attached (optional)

4. Requested Hardship Assistance	
Please provide a breakdown of the assistance being requested.	
Expense / Purpose	Amount Requested
Total Amount Requested	

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5. Hardship Bursary Policy Requirement
Hardship support is discretionary and requires the student to be active in their program and compliant with all reporting requirements.

6. Student Declaration	
I confirm that the information provided is accurate and complete. I understand that hardship support is discretionary and subject to meeting program and reporting requirements.	
Signature:	Date:

8. Director Approval		
Name:	Signature:	Date:

Please submit application and supporting documents to:
Department of Education, Délı̨nę Got'ı̨nę Government
P.O. Box 156 Délı̨nę, NT X0E 0G0
Email: education.support @gov.deline.ca
Ph: (867) 589-3515 ext. 1110