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## **GITLAXT'AAMIKS VILLAGE GOVERNMENT APPLICATION FOR GRAD INCENTIVE**

NAME: \_\_\_\_\_

ADDRESS: PO BOX: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ WORK: \_\_\_\_\_

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

STUDENT NAMES	DATE OF BIRTH	GRADE 12	STATUS NUMBER	NISGA'A CITIZEN NUMBER

\_\_\_\_\_  
PARENT OR LEGAL GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

