

## SCHOOL DISTRICT No. 69 (QUALICUM)

### ADMINISTRATIVE PROCEDURE

#### BOARDING SUBSIDY

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#### **Purpose**

The Board of Education acknowledges that it may be necessary for students from Lasqueti or other islands within School District 69 electoral boundaries to live away from home in order to attend school beyond the grade levels offered at False Bay School.

The Board of Education may assist in providing a monthly Boarding Subsidy to eligible students in order to assist families with the costs associated with living away from home to pursue high school graduation in a School District 69 school.

#### **Procedure**

1. Application shall be made annually to the Secretary Treasurer.
2. Applicants shall meet the following criteria:
  - a. The student's ordinary residence (the place to which the student returns when not in school) is on Lasqueti or other islands within School District 69 electoral boundaries.
  - b. The student will be in attendance at a School District 69 public school.
  - c. The student may not be taking all of his/her courses through a distributed learning program such as the Collaborative Education Alternative Program (CEAP).
  - d. The student is required to enroll in a grade level not offered at False Bay School.
  - e. The student is of school age (less than 20 years of age at the end of the school year).
3. Payment shall be dependent upon regular school attendance and a demonstrated commitment to learning and success.
4. Payments shall be made at the end of each school month following receipt by the Secretary Treasurer of verification from the enrolling school of the student's regular attendance and commitment to success.
5. An assignment by the parent(s) must be submitted to allow the Board to pay the subsidy on behalf of the parent(s) directly to the person providing the boarding/lodging.
6. All contractual arrangements for boarding/lodging of a student are between the parent(s) of the student and the person(s) providing the boarding/lodging.
7. Necessary forms for boarding/lodging subsidy application shall be made available on the School District 69 website.
8. The amount of the subsidy will be reviewed annually and adjusted in concert with the Consumer Price Index for BC in January of each year.



# SCHOOL DISTRICT No.69 (QUALICUM)

100 Jensen Avenue East

P.O. Box 430, Parksville, B.C. V9P 2G5

Phone (250) 248-4241 Fax (250) 248-5767

## APPLICATION FOR BOARDING SUBSIDY

APPLICANT INFO	1.	Applicant's name:	
	2.	Relationship to student(s):	
	3.	Street address or legal description of family home on the island:	
	4.	Applicant's mailing address:	
	5.	Telephone # & Email address:	
	6.	Comments (if any)	

BOARDING INFO	1.	Person with whom student(s) will be boarding:	
	2.	Relationship to student(s):	
	3.	Street address of boarding home: (House number, Street, Town, Postal Code)	
	4.	Mailing address (if different):	
	5.	Telephone #:	
	6.	Boarding commencement date:	

STUDENT		STUDENT'S NAME	AGE	GRADE	NAME OF SCHOOL
	1.				
2.					

**I hereby apply for SD69 Boarding Subsidy and:**

- **I declare that the above noted student(s) meet the criteria listed on Administrative Procedure - Boarding Subsidy.**
- **I am aware that payment shall be dependent upon the student's regular school attendance and demonstrated commitment to learning and success.**
- **I assign all approved boarding subsidy payments directly to the person providing the boarding/lodging (as listed above).**

**APPLICANT'S SIGNATURE** \_\_\_\_\_

**DATE SIGNED:** \_\_\_\_\_  
(Day/Month/Year)

**OFFICE USE ONLY**

Copy to A/P: \_\_\_\_\_

Approved by: \_\_\_\_\_

Approval/denial letter sent: \_\_\_\_\_

Monthly Rate: \_\_\_\_\_ Date: \_\_\_\_\_



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## MONTHLY BOARDING SUBSIDY REPORT

Boarding Subsidy payment is dependent upon the student's regular school attendance and demonstrated commitment to learning and success.

Verification that Boarding Subsidy eligibility requirements have or have not been met during:

**MONTH:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_

\_\_\_\_\_  
(student's name)

\_\_\_\_\_  
(enrolling school)

- 1) Regular attendance requirement has been met:  YES  NO
- 2) Commitment to learning and success requirement has been met:  YES  NO

\_\_\_\_\_  
(Principal's signature)

Payment approved by:

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Secretary-Treasurer)