



OKANAGAN INDIAN BAND

12420 Westside Road, Vernon BC V1H 2A4 Phone: 250 542-4328 Fax: 250 542-4990
Email: okibeducation@okanagan.org

Advocate Appointment Form

Name _____

University/College _____

Date _____

Contact Number _____

The person listed below is authorized to Advocate on my behalf:			
Advocate Information			
Name			
Mailing Address		Telephone #	
City	Province	Postal Code	
Relationship to the Applicant / Student			
The person listed below can also access information from my funding application / student file information		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Student Signature		Date	