



# Work Force Qalipu

## Funding Application

### PERSONAL INFORMATION:

Please Print

Name: \_\_\_\_\_ SIN#: \_\_\_\_\_  
Address: \_\_\_\_\_ Tel #: \_\_\_\_\_  
\_\_\_\_\_  
E-mail: \_\_\_\_\_  
\_\_\_\_\_  
DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year  
Gender: Male  Female   
No. of Children under Age 18: \_\_\_\_\_ Marital Status: Single  Married  Other   
Age(s) of Dependents: \_\_\_\_\_ Preferred Language: \_\_\_\_\_  
Grade Level completed: \_\_\_\_\_ Year: \_\_\_\_\_  
Post-Secondary completed: \_\_\_\_\_ Year: \_\_\_\_\_  
Qalipu Mi'kmaq First Nation Band Registration #: \_\_\_\_\_  
Do you have a disability? Yes  No  if yes, please specify: \_\_\_\_\_

### COURSE INFORMATION FUNDING REQUEST

Name & Location of Training Institution: \_\_\_\_\_  
Course Name: \_\_\_\_\_  
Duration of Program (Yrs or Mths): \_\_\_\_\_ Start date: \_\_\_\_\_ End date: \_\_\_\_\_  
Tuition Cost per Semester or Program: \_\_\_\_\_ Book Cost per Semester or Program: \_\_\_\_\_

### FINANCIAL STATUS

Are You Employed? Yes \_\_\_\_\_ No \_\_\_\_\_ Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_

If "yes", please indicate your gross weekly income: \$ \_\_\_\_\_

If "yes", please indicate the number of hours you work per week: \_\_\_\_\_

If "yes", please indicate whether or not this is summer employment: Yes  No

If "no", are you in receipt of EI benefits? Yes  No

If "no", have you been in receipt of EI benefits in the past three years? Yes  No

If "yes", please indicate your weekly EI rate: \$ \_\_\_\_\_

Are you receiving any of the following?

HRLE Income Support

If you are in receipt of any of the above, please indicate your monthly rate: \$ \_\_\_\_\_

## PREVIOUS EDUCATION/TRAINING

Have you previously attended a Post- Secondary or Training Institution? Yes  No  If yes, please provide the following information:

Degree/Course Title: \_\_\_\_\_

University/Training Institute: \_\_\_\_\_

Start & End Date of Program: \_\_\_\_\_

Did you pay for this program on your own: Yes  No

If no, were you sponsored by agency? Yes  No

If yes, please state the name of the agency \_\_\_\_\_

### Declaration

Signing this application allows Work Force Qalipu Offices to obtain information from all ARMS or Employment Services Offices (EAS).

Applications may also be used for public documents such as Minutes, Work Force Qalipu Reports, Board Kits, etc. The Qalipu Mi'kmaq First Nation Band agrees to share this information with Service Canada or Indian and Northern Affairs Canada.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Application

### Submit Applications to:

**Work Force Qalipu**  
**P.O. Box 460**  
**St. George's, NL**  
**A0N 1Z0**

### **YOUR APPLICATION WILL NOT BE CONSIDERED COMPLETE IF THE FOLLOWING ARE NOT ATTACHED:**

- Proof of membership in the Qalipu Mi'kmaq First Nation Band. Include one of the following; your Temporary Confirmation of Registration Document, or a copy of your Certificate of Indian Status Card.
- An Acceptance or Provisional Acceptance Letter from the Educational Institution.
- A copy of your Grade 12 Transcript or proof of Adult Basic Education. Level 3 students applying to Post-Secondary studies include Level 2 Transcript and your most recent Progress Report.
- A breakdown of expenses from the Educational Institution.
- For Post-Secondary Programs at University or College, a breakdown of semesters by date to the end of your Course of Study - Indicate if any of these semesters are classed as Work Terms.
- If you are currently enrolled in the Course of Study and are requesting funds to complete that program, you must provide a Transcript from the Educational Institution regarding your present Academic Status. On-line printouts are acceptable if they display the student name.
- A written summary (not more than 250 words) of why you have chosen this field of study and what your career goals are after completion of the Course of Study.
- You must also register with the Qalipu Membership Database in order to receive funding. Please Visit [www.qalipu.ca/login-options](http://www.qalipu.ca/login-options)



## Detailed Program Cost Breakdown

Year	Semester	Semester Start Date	Semester End Date	No of Weeks	Tuition Costs	Compulsory Fees	Book Costs
Sample	Fall	01-Sep-11	15-Dec-11	15	\$2,000	\$150	\$500
	Winter	03-Jan-12	15-Apr-12	14	\$2,000	\$150	\$500
	Intersession	25-Apr-12	24-Jun-12	14	\$2,000	\$150	\$500
1	Fall						
	Winter						
	Intersession						
2	Fall						
	Winter						
	Intersession						
3	Fall						
	Winter						
	Intersession						
4	Fall						
	Winter						
	Intersession						
5	Fall						
	Winter						
	Intersession						

This document is required in order for your application to be considered. Please contact your post secondary education provider for this information.