



Dehcho First Nations

Indigenous Skills and Employment Training Program

<u>ISET Program Office Use Only</u>	
Name	_____
Date Received	_____
Type of Application	_____
EI	_____ CRF _____

ISET Program Application

Instructions: Complete the ISET Program application and submit it to the ISET Program office. Along with your completed application, please attach the mandatory supporting documents. Please be advised that all supporting documents must be fully submitted by the ISET Program deadline in order to be considered.

Submission Requirements

Please make sure you have all the following documents that apply to you attached to your application.

Mandatory Supporting Documents	Attached
If you are in receipt of any EI benefits, please ensure you check the box which applies to you	
Attach copy of your valid NWT Health Care Card	
Attach copy of your valid Status Card	
List all dependents residing with you. Attach copy of Birth Certificate and valid NWT Health Care Card	
Attach letter of acceptance into the course/school you are attending	
Attach ISET Program Enrollment Form outlining tuition, fees, books & supplies	
Attach the program description you are enrolling in (online and distance courses only)	
Attach primary funding acceptance or denial letter. Those that are SFA funded must attach Form D	
Attach copy of your most recent transcripts	
Attach current resume	
For dependent care, please provide letter from childcare business that includes monthly cost	

Basic Eligibility Requirements

1. Applicants must be First Nation, Metis or Inuit
2. Applicants requesting funding assistance must live in the Dehcho region
3. A career plan must be prepared
4. Full financial information must be disclosed, including a budget and sources of income
5. The applicant must provide approval/denial letters from other funding sources
6. Full-time students must maintain 60% in-class course load. Assistance not available for part-time students

Personal Information

Last Name _____ Home Phone Number _____
 First & Middle Name(s) _____ Cell Phone Number _____
 Maiden Name _____ Date of Birth _____
 Social Insurance Number _____ NWT Health Card Number _____ Expiry Date _____
 Gender Male Female Undisclosed Email _____

Marital Status

Single Common Law (living together for 12 consecutive months) Married Divorced Separated Widowed

If Married or Common Law, please provide Spouse's Information

Full Name _____
 Employment Status Employed Unemployed Going to School EI Benefits
 Employment Type Full-Time Part-Time Casual Seasonal

Current Home Address

Street Address	P.O Box	Apt/House #	City	Territory/Province	Postal Code

School Home Address

Street Address	P.O Box	Apt/House #	City	Territory/Province	Postal Code

Indigenous Identifications

Referred to ISET Program by _____
 Languages Spoken _____ Language Preferred _____

Registered to

First Nation Inuit Métis Other Status Number _____
 Community _____ Registered Band Name _____

Do you have a disability or suspect that you may have a disability? Yes No

If yes, list or explain the nature of your condition _____

Valid Driver License Yes No **If yes, please provide your driver license information**

Class _____ Expiry Date _____ Territory/Province Attained _____ Do you own your own vehicle? Yes No

Dependent Information

Name (First and Last)	Date of Birth	Relationship	Level of Education

Employment History

Employment Readiness

I am ready and willing to work
 Not ready for work
 Unable to work
 Unable to work-medical

If not ready to work or unable, please explain _____

Are You Currently Employed? **Yes** **No** **If yes** **Full-Time** **Part-Time** **Casual** **Seasonal**

Organization _____ Job Title _____

Supervisor Name _____ Hourly Rate _____

Start Date _____ End Date _____ Will you be working during training? Yes No Returning once completed

Former Employer

Organization _____ Job Title _____

Supervisor Name _____ Hourly Rate _____

Start Date _____ End Date _____ Reason for Leaving _____

Employment Insurance (EI) Benefits

Are you currently receiving EI Benefits? Yes No If yes, please provide the start date _____

Have you received regular/special EI Benefits within the last 5 years? Yes No

Have you received maternal/paternal benefits in the last 5 years? Yes No

Income Assistance

Are you currently receiving income assistance benefits? Yes No

EDUCATION HISTORY

Previous Education

Educational Institution	Grade/Level	Community	Date Complete

Safety Tickets, Trade Licences or Certification (Carpentry, Mechanics, Plumbing etc.) Attach copy/copies to application

Ticket/Licence/Certificate	Level	Years of Experience	Start Date	End Date

Employment Barriers

<input type="checkbox"/> Lack of labour force attachment	<input type="checkbox"/> Lack of marketable skills	<input type="checkbox"/> Lack of transportation	<input type="checkbox"/> Economic	<input type="checkbox"/> Remoteness
<input type="checkbox"/> Physical, emotional or mental health	<input type="checkbox"/> Lack of work experience	<input type="checkbox"/> Education	<input type="checkbox"/> Language	<input type="checkbox"/> Dependant Care
<input type="checkbox"/> Other barriers not listed				

Proposed Education/Training

Institution _____ Program _____

Community _____ Start Date _____ End Date _____ Year _____ of a _____ Program

Full-Time Part-Time Short Course Online/Distance

Licence Certificate Diploma Degree Other _____

Have you been accepted? Yes No Confirmation pending

Expenses for Location of Residence and Education/Training

Budget	Actual Cost	Primary Funding Amount	ISET Program Top-Up Requested Amount	Amount Approved ISET Program Office Use Only
Tuition and Fees				
Books				
Supplies				
Travel				
Living Allowance				
Rent				
Dependant Care				
Total Cost of Expenses				

Please List All Sources of Income

Individual or Agency Providing Financial Assistance	Applied	Approved	Denied	Amount of Funding

BANKING INFORMATION

CIBC Banking Information (approved assistance will be deposited directly into CIBC account)

Institution Number	Transit Number	Account Number
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WE Card

Account Number	Expiry Date
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If you do not have a CIBC account or WE Card, you will receive a cheque in the mail to your school mail address provided on the ISET Program application. Please update ISET Program staff of any changes to mailing address while in school.

Other Information

Please use separate sheet to provide other information you feel may be important in reaching a decision.

PLEASE READ AND THEN SIGN THE CONSENT CLAUSE, DECLARATION AND RELEASE OF INFORMATION

1. In connection with my application for funding, I hereby authorize Dehcho First Nations (DFN) ISET Program to request information regarding my academic progress and to request written documentation from the education institution, including official transcripts.
2. I hereby consent to the sharing of any information regarding my training and employment status and any aspect of this application, which may affect the Indigenous Skills & Employment Training Program agreement between Employment and Social Development Canada (ESDC) and Dehcho First Nations ISET Program.
3. I hereby apply to the Dehcho First Nations ISET Program top-up assistance and declare and acknowledge that
 - a. The information contained in this application is complete and true in every respect
 - b. False statements may result in the termination of benefits, the recovery of benefits already paid and/or my ineligibility to receive any type of funding from DFN ISET Program for a period of two years
 - c. If I am suspended, released or do not complete my Program, as described in the "proposed activities", I will be required to reimburse DFN ISET Program the full amount of the financial assistance received and that I may become ineligible for any type of funding from DFN ISET Program for a period up to two years
 - d. I will inform DFN ISET Program staff of any changes to my funding from other sources as outlined above.
 - e. DFN ISET Program can at any time request verification of dependents residing with you or in which you are providing a monthly allowance for.
 - f. The information contained in this document is shared with Employment and Social Development Canada. The applicant has the right, under the Privacy Act, to obtain this information from ESDC.
4. I hereby consent that DFN ISET Program may use my photo, program, school and success story in DFN Assembly posters, newspapers, website, etc.
5. I hereby consent that DFN ISET Program may verify whether or not I am in receipt of funding from any other NWT ISET Agreement Holders.

I have read and will abide by the above agreement.

Signature of Applicant

Date

Applying for the ISET Program top-up assistance does not mean that you will be selected. Priority will be given to applicants meeting labour market demands who have maintained and/or fulfilled the above requirements. If you have any questions or need help filling out the application, please call our office. Failure to submit a complete application package will result in a delay of the application process.

Right to Appeal

- Clients applying for the ISET Program top-up assistance have the right to appeal a decision of non-approval.
- Please discuss any questions or concerns with the ISET Program staff.
- Please be advised that DFN ISET Program has the final word on the application appeal process.

ISET Program Staff Contact

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Deh Gah Gotie

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