



**Inuvialuit Regional Corporation  
Education and Training**

867-777-7060 Toll Free: 1-855-777-7011 Fax: 867-777-4506

## **INUVIALUIT REGIONAL CORPORATION INDIGENOUS SKILLS AND TRAINING EMPLOYMENT (ISET) PROGRAM**

### **PROGRAM DESCRIPTION**

The Indigenous Skills and Employment Training (ISET) Program is a federally funded program designed to help Indigenous people improve their skills and find employment. Through an agreement with Employment and Social Development Canada under the Inuit Labour Market Strategy, IRC administers ISET for Inuvialuit, including establishing program guidelines that best meet the needs of Inuvialuit beneficiaries.

### **Checklist:**

- completed signed application package (incomplete applications will not be accepted)
- proof of enrolment from Inuvialuit Regional Corporation (contact: [earey@inuvialuit.com](mailto:earey@inuvialuit.com) for proof if needed)
- Two proofs of identification (i.e., health care card and picture ID)
- proof of identification for dependents (i.e., health care card)
- proof of application to SFA funding – Northwest Territories & FANS funding – Nunavut
- proof application/approval for Provincial Student Aid (do not apply for loans if possible)
- proof of Employment Insurance (we will do an EI check)
- tuition and student fee amounts
- acceptance to program (Form D)
- transcripts (grade 12 or most current post-secondary education)
- rental agreement or mortgage documents (to calculate accommodation allowance)

### **DEADLINE FOR APPLICATIONS**

<b>Fall Semester:</b>	July 15 <sup>th</sup>
<b>Winter Semester:</b>	November 15 <sup>th</sup>
<b>Spring &amp; Summer Semester:</b>	March 15 <sup>th</sup> or one month before program begins

### **Contact**

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Inuvialuit Regional Corporation  
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Telephone: 1 (867) 777-7091  
Fax: 1(877) 559-2014  
Email: [education@inuvialuit.com](mailto:education@inuvialuit.com) or [mrogers@inuvialuit.com](mailto:mrogers@inuvialuit.com)

## ISET PSE PROGRAM APPLICATION

### CLIENT INFORMATION

<b>Surname</b>		<b>Given Names</b>	
<b>SIN #</b>		<b>Also Known As</b>	
<b>Date of Birth</b>		<b>Sex</b>	<input type="radio"/> Male <input type="radio"/> Female
<b>Marital Status</b>	<input type="radio"/> Divorced <input type="radio"/> Married/Common-Law <input type="radio"/> Separated <input type="radio"/> Single <input type="radio"/> Widowed If Married or Common Law, please provide name of spouse: Please indicate if spouse is: <input type="radio"/> Employed <input type="radio"/> Unemployed <input type="radio"/> Other: _____		

### RESIDENCE/MAILING ADDRESS

<b>Address</b>	<b>Postal Code</b>
<b>Town/City</b>	<b>Contact Number</b>
<b>Territory/Province</b>	<b>Email Address</b>

### NEXT OF KIN/SPOUSE

<b>Name</b>	<b>Address</b>
<b>Town/City</b>	<b>Territory/Province</b>
<b>Phone Number</b>	<b>Relationship</b>

### PERSONAL

<b>Citizenship</b>	CANADIAN	<b>Aboriginal Group</b>	INUVIALUIT
<b>Beneficiary Number</b>		<b>Referred By</b>	
<b>Language(s) Spoken</b>		<b>Language Preferred</b>	
<b>Community Corporation</b>	<input type="radio"/> Aklavik <input type="radio"/> Inuvik <input type="radio"/> Paulatuk <input type="radio"/> Sachs Harbour <input type="radio"/> Tuktoyaktuk <input type="radio"/> Ulukhaktok <input type="radio"/> Outside ISR		
<b>Have a Disability</b>	<input type="radio"/> Yes <input type="radio"/> No	<b>Labour Force Category</b>	<input type="radio"/> Employed <input type="radio"/> Student <input type="radio"/> Unemployed
<b>Employment Readiness</b>	<input type="radio"/> Not Ready to Work <input type="radio"/> Ready to Work <input type="radio"/> Unable to Work <input type="radio"/> Working <input type="radio"/> Other		
<b>Own a Vehicle</b>	<input type="radio"/> Yes <input type="radio"/> No	<b>License Class</b>	
<b>Territory/Province</b>		<b>Expiring</b>	

### DEPENDENTS (19 years and under and still dependent on you)

Surname	Given Names	Date of Birth	Relationship	Attending School	Living with You

**EMPLOYMENT HISTORY (Information must be filled out in full including dates)**

Employer	Job Title	Start Date	End Date	Reason for Leaving

**ACTION PLAN ASSESSMENT (filled out by ISET Program Staff)**

Employment Dimension	Employment Status (Start)	Is Childcare Required	Action Plan Description

Employment Barriers	Plan to Overcome
1. None	
2. Lack of labor force attachment	
3. Lack of work experience	
4. Lack of transportation	
5. Remoteness	
6. Language	
7. Education	
8. Economic	
9. Dependent care	
10. Lack of marketable skills	
11. Physical, emotional or mental health	
12. Other _____	

**PROGRAM INFORMATION**

<b>School:</b>	<b>Location:</b>
<b>Program:</b>	<b>Program Type (only check one)</b> <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Masters <input type="checkbox"/> Other
<b>Dates of Term (detailed dates required):</b> Fall: _____ Winter: _____ Spring: _____ Summer: _____	<b>Funding:</b> <input type="checkbox"/> SFA Funding – Northwest Territories <input type="checkbox"/> FANS Funding – Nunavut <input type="checkbox"/> Provincial Student Aid – Yukon & all Provinces <input type="checkbox"/> Employment Insurance <input type="checkbox"/> Other Income _____

Student Type (check one): <input type="checkbox"/> NEW <input type="checkbox"/> CONTINUING <input type="checkbox"/> RETURNING	School Attendance will be (check one): <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time (Form D to be filled out)
Year of Studies currently in (check one): <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> MA <input type="checkbox"/> PhD  Length of Program in Years (check one): <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Funding Requested for (check all that apply):  <input type="checkbox"/> Fall semester (September+) <input type="checkbox"/> Winter semester (January+) <input type="checkbox"/> Spring/Summer semester (May+)

**EDUCATION INFORMATION (Trades etc.)** (indicate if graduated)

Level	Discipline	Certification	Date Completed	Institution

Examples for Level: High School, License, Certificate, Diploma, Degree, Undergraduate, Masters, Doctorate

**EMPLOYMENT SEEKING**

Industry Type	Job Title	Special Needs	Comments

**EMPLOYMENT INSURANCE BENEFITS**

Are you receiving EI	<input type="radio"/> Yes <input type="radio"/> No	If answer is Yes start date	
Worked full-time in last 6 months	<input type="radio"/> Yes <input type="radio"/> No	Received EI last 3-5 Years	<input type="radio"/> Yes <input type="radio"/> No

**Estimate of Expenses (For living and school estimation purposes only)**

Monthly Living Costs	Amount	One-Time Education Costs	Amount
Rent/mortgage <i>(Include lease/mortgage agreement)</i>		Tuition and student fees for term of study. #__ of terms.	
Utilities <i>(Include heating, power, water bills)</i>		Mandatory books/supplies	
Local transportation to and from school <i>(gas, public transport)</i>		Return transportation (school/home 2 return trips)	
Food and Cleaning Supplies		Other (Please specify)	
Personal Items		<b>D.2. Total One-Time Education Costs</b>	
Childcare		<b>Calculation of Total Expenses:</b>	
Wi-Fi Services		*(D.1) Total monthly living costs multiplied by number of months term of study \$ X mons.	
Other <i>(Please Specify):</i>		*(D.2) Total one-time education costs	
<b>D.1. Total Monthly Living Costs:</b>		<b>*D.3. Total Expenses (D.1 plus D.2)</b>	

**Educational Goals and Progress**

Up to this point in my education, I have completed the following (please list any courses, certificates, diplomas you have completed):

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For the academic year 2022-2023, I plan to complete:

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Long term academic goals:

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Additional comments:

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I confirm that the all the personal information provided is complete and accurate. I accept responsibility for satisfying the academic requirements of the above institution and managing the education funds to the best of my ability.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

# INDIGENOUS SKILLS AND EMPLOYMENT TRAINING PROGRAM

## PSE STUDENT FUNDING AGREEMENT

2021-2022 Academic Year

The **INUVIALUIT REGIONAL CORPORATION** through a Contribution Agreement administered with Employment and Social Development Canada is pleased to assist you with your education. Prior to funding, you, the student, must agree to the following:

1. To attend class on a regular basis as continued absence could result in failure and related funding suspension.
2. to complete all sponsored courses and programs
3. to maintain a minimum course load for a full-time student as defined by your post-secondary institution.
4. to maintain a passing grade in each registered course.
5. to submit a transcript of marks for completed courses within one month after each semester has ended.
6. to notify the IRC Education and Training Department in writing of any changes in plans, courses, address, etc.

I, \_\_\_\_\_ (the applicant/student), have read and understand the above and agree to these conditions and requirements. I understand that failure to fulfil these requirements and conditions may result in my funding being suspended.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

### RELEASE OF INFORMATION

I consent to and authorize the release of any personal information by my employer, banks or other financial institutions, mercantile organizations, aboriginal organizations, educational institutions and by federal, provincial, territorial and municipal government departments and agencies, including the Canada Customs and Revenue Agency to the Inuvialuit Regional Corporation. My personal information will be used to determine my initial and continued eligibility for funding and for the effective and efficient general administration and enforcement of the IRC Inuit Post-Secondary Education Strategy (IPSES).

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**