



KIA Inuit Post-Secondary Education Program

PROGRAM DESCRIPTION AND ELIGIBILITY

The Inuit Post-Secondary Education Program (IPSEP) provides financial assistance to eligible students towards the cost of their post-secondary education. Kitikmeot Inuit in the following categories are eligible:

- Full or part-time students registered in a certificate, degree, diploma or apprenticeship program at a post-secondary institution. The duration of this program must be at least one academic year.
- Full or part-time students enrolled in a university or college prep program offered at a post-secondary institution. The duration of this program may not be more than one year.

APPLICATION PROCEDURES

Applications to the Inuit Post-Secondary Education Program must include:

- Completed and signed application form.
- Banking direct deposit form.
- Copy of applicant's identification (one of birth certificate/health care card/driver's license).
- Copy of identification for all dependents claimed (one of birth certificate/health care card).
- Current resume.
- Program outline and approximate fees for post-secondary program applied for (can be printed from institution's website).
- Proof of acceptance or conditional acceptance into a post-secondary program of studies.
- Proof of FANS, ALTS or NWT SFA acceptance/denial for funding (*NWT or NU residents only*).

Applications may be submitted without this letter; however, your application will not be reviewed until this letter is received.

DEADLINE FOR APPLICATIONS

Applications will be accepted at any time; however, processing will take at least 21 days. Please note for Nunavut and NWT residents, proof of FANS/NWT SFA approval or denial must be provided before your application can be reviewed. Students are encouraged to apply early to allow enough time for processing.

CONTACT US / SUBMIT APPLICATIONS









We are here to support you with your post-secondary education goals! Contact the PSE Coordinator for help with your application or to learn more about the program at psecoordinator@kitia.ca or 867-983-2458 extension 227. Send completed applications to:

By email	By mail	In Person
psecoordinator@kitia.ca	Attn: PSE Coordinator Kitikmeot Inuit Association Box 18 Cambridge Bay, NU X0B 0C0	Attn: PSE Coordinator 30 Mitik Street Fred R. Elias Centre Cambridge Bay, NU

Inuit Post-Secondary Education Program (IPSEP) Application Checklist

**** If you are eligible for FANS, ALTS or NWT SFA you must apply to them first. ****
This program only offers top-ups for these students.

Please ensure you have all the following items before submitting your application.

	Completed Application Form	Fully filled in attached application form. If you have any questions, or don't have some of the required information please contact the PSE Coordinator for assistance.
	Banking Direct Deposit Form	A void cheque or direct deposit form for the bank account where you would like your payments deposited.
	Copy of Applicant's Identification	One copy of any government issued ID such as a birth certificate, health care card, driver's license or passport.
	Copy of each dependent's identification	For each dependent listed on your application form, please provide one copy of their government issued ID such as a birth certificate or health care card.
	Current Resume	If you require assistance creating or updating your resume, please contact the PSE Coordinator.
	Program / Course Details	A copy of the program outline for your proposed studies. This can typically be found and printed from your institution's website.
	Institution's Acceptance Letter	Documentation showing you have been accepted or conditionally accepted into your proposed program/institution.
	FANS/ALTS or NWT SFA documentation <i>(Nunavut and NWT residents only)</i>	A letter or other documentation from FANS, ALTS, or NWT SFA that shows your acceptance or denial of funding. You may submit your application before you get this letter; however, your application will not be reviewed until you submit this letter to KIA.

KIA IPSEP APPLICATION FORM

CLIENT INFORMATION (as shown on your ID)

Last Name		First Name	
Preferred Last Name (if applicable)		Preferred First Name (if applicable)	
SIN		Gender	<input type="radio"/> Male
Date of Birth			<input type="radio"/> Female <input type="radio"/> Another Gender
Marital Status	<input type="radio"/> Married / common-law with working spouse* <input type="radio"/> Married / common-law with non-working spouse* <input type="radio"/> Married / common-law with student spouse* <input type="radio"/> Single <i>* couples will be considered common-law if they have lived together as a family for at least one year prior to the student's application to the IPSEP.</i>		
Spouse Full Name			
NTI Number			
	Community student is registered with under the Nunavut Agreement: <input type="radio"/> Cambridge Bay (5210) <input type="radio"/> Kugluktuk (5211) <input type="radio"/> Gjoa Haven (5212) <input type="radio"/> Kugaaruk (5213) <input type="radio"/> Taloyoak (5214)		

PERMANENT MAILING ADDRESS / CONTACT INFORMATION

Mailing Address		Postal Code	
Town/City		Territory/Province	
Email Address		Phone Number	

CONTACT INFORMATION WHILE AT SCHOOL (IF KNOWN)

Mailing Address		Postal Code	
Town/City		Territory/Province	
Email Address		Phone Number	

EMERGENCY CONTACT INFORMATION

Name		Address	
Town/City		Territory/Province	
Phone Number		Relationship to Student	

DEPENDENTS - a child, stepchild, adopted child or a child you have legal custody or guardianship of who is 18 years old or younger, are financially dependent upon you, and are living with you at least 50% of the time in each semester you are receiving assistance. See IPSEP policy for more information about dependents.

Last Name	First Name	Date of Birth	Relationship (to you)	Living with you while at school (Y / N)

PROGRAM INFORMATION

School / Institution		Program Type	<input type="radio"/> Degree <input type="radio"/> Diploma <input type="radio"/> Certificate <input type="radio"/> University/College Prep <input type="radio"/> Apprenticeship
Location			
Program			
School Attendance	<input type="radio"/> Full-Time <input type="radio"/> Part-Time	Method of Instruction	<input checked="" type="checkbox"/> In-Person <input type="checkbox"/> Distance Education
Year of Studies	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Length of Program in Years	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> Other: _____
Funding Requested for	<input checked="" type="checkbox"/> Fall Semester (September). <input type="checkbox"/> Winter Semester (January) <input type="checkbox"/> Spring/Summer Semester (May)	<input checked="" type="checkbox"/> Other (provide program dates below) Start date: _____ End date: _____	

PAST FUNDING

Have you been funded by the Kitikmeot Inuit Association in the past? <i>(not including scholarships)</i>			
<input type="radio"/> No <input type="radio"/> Yes	<input type="radio"/> Yes	Year applicant last received funding	
		Name of program	
		Did you complete the program you were funded for?	<input type="radio"/> Yes <input type="radio"/> No

CURRENT FUNDING

Applied for FANS / ALTS / NWT SFA	<input type="radio"/> yes <input type="radio"/> no	Status of application	<input type="radio"/> approved <input type="radio"/> denied
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Please attach letter/correspondence from FANS, ALTS or NWT SFA to support the information above.

Are you applying for or receiving funding from any other organizations (not including scholarships) such as EI, a First Nations Band or Government, or Income Assistance?

Reason for applying to IPSEP for funding:

EDUCATIONAL GOALS AND PROGRESS

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

For this academic year, I plan to complete:

Long term academic goals:

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REQUESTED SUPPORTS - PSE Coordinator can provide assistance if required

Description	Requested	Notes
Tuition and Fees	<input type="checkbox"/>	
Relocation to School <i>If relocating for school, how will you be travelling? (plane, bus, personal vehicle, etc.)</i>	<input type="checkbox"/>	
Required Textbooks and Supplies Identified By School	<input type="checkbox"/>	
Living Allowance	<input type="checkbox"/>	
Child Care Costs <i>If private sitter, list name of sitter. If licensed daycare, list name and address of daycare.</i>	<input type="checkbox"/>	
Rent / Residence <i>List monthly rent costs. Indicate if single or shared unit. If sharing, list name of roommate. Indicate if rent includes meals.</i>	<input type="checkbox"/>	
Other Costs (indicate)	<input type="checkbox"/>	

DECLARATION & AUTHORIZATION TO RELEASE INFORMATION:

Please read the following and sign where indicated:

1. I understand that meeting the eligibility requirements does not guarantee funding. The actual amount of money received will be based on IPSEP funds available when the application is reviewed.
2. I declare that the information given above is true, correct, completed and understand that it may be subject to verification. I understand that it is an offence to make false statements.
3. I understand that the Kitikmeot Inuit Association will share the above information with the Government of Canada (GOC), and that I consent to the disclosure of this information to GOC.
4. I have been advised by Kitikmeot Inuit Association that the information that I provided is protected under Canada's Privacy Act and that I have a right under the Privacy Act to obtain access to that information from GOC.
5. I hereby authorize Service Canada to release information about the status and benefit rate of my Employment Insurance claim to Kitikmeot Inuit Association to determine my eligibility for the program and/or for alternative income support.
6. I hereby authorize Kitikmeot Inuit Association to release and/or request information as required from Nunavut Government Department of Family Services, Department of Education, Financial Assistance for Nunavut Students (FANS), NWT Student Financial Assistance (SFA), my childcare provider, and my landlord to determine my eligibility for the program and for verification purposes throughout the duration of the program.
7. I authorize Kitikmeot Inuit Association at any time to request for information regarding my academic progress including enrollment confirmation, education costs, and transcripts from the educational institution that I will be attending.
8. I agree to the use of my name, pictures, data and other relevant information by Kitikmeot Inuit Association in documentary, newsletters, and statistics relevant to the training programs, and Kitikmeot Inuit Association having exclusive rights to use the picture, video, statistics and relevant information at any time and for future use by the Kitikmeot Inuit Association. I will have no future claim to the information, data, or pictures. In other words, KIA may use photos and other information gained during the program in KIA related business and reports.
9. This authorization will remain in effect UNLESS I give written instruction to cancel the authorization.

By signing this application form, you have read and understood the *DECLARATION & AUTHORIZATION TO RELEASE INFORMATION* written on this form.

Applicant Name and Signature

Date