

Inuit Connection Program Application 2023

Applicant Information

Full Name: _____ DOB: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone: _____ Email _____

Are you Available: **August 5-12, 2023** _____

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|------------------------------------------------------------|------------------------------|-----------------------------|-------------------------------------|------------------------------|-----------------------------|
| Are you a Nunatsiavut Beneficiary? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Do you speak Inuttitut? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Have you ever been to the Torngat Mountains National Park? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Do you have experience on the land? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you have any allergies? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Do you have any mobility issues? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

If yes, what allergies: _____

References from previous programs attended

Please list two references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Applicant Signature: _____ Date: _____

Inuit Connection Program

1. Why would you like to attend the Inuit Connection Program to the Torngat Mountains National Park:

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2. What would you contribute to the Inuit Connection Program if you were a successful candidate:

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3. What do you hope to learn by attending the Inuit Connection Program:

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4. What is your family connection to the Torngat Mountains area (please list specific areas of your family history):

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