



Nunatsiavut Government – EDUCATION DIVISION

P.O. Box 116 Makkovik, NL AOP 1J0
Email: education@nunatsiavut.com
Website: www.Nunatsiavut.com

Telephone: (709) 923-2105
Toll Free: 1-877-923-2171
Fax: (709) 923-2347



Renewal Form

Student Name: _____ Program: _____
Student #: _____ Institution: _____
Living Arrangements (while in training):
Check one box per semester:
[] renting/boarding
[] living with parents
[] campus residence
[] own home
Primary Email Address: _____
Mailing Address (while in training): _____
City/Town: _____
Province: _____
Postal Code: _____
Primary Phone #: (____) _____

Status (Check all that apply to you)
[] Full-time [] Part-time [] PhD/Masters (Course outline required) [] Flight school (Course outline required)
[] Self-paced (Asynchronous, course outline req'd) [] Self-paced (Synchronous. Athabasca U or similar, course outline req'd)
of courses _____ (if applicable) # in-person _____ # online _____
[] This is a paid work term [] This is an unpaid work term [] This is not a work term
*A confirmation of work term stating: Start/end date, salary, location must be send to education@nunatsiavut.com

Semester Entering (please check one): If renewing for more than one semester, please send in separate renewal forms.
[] Fall (Sept-Dec) [] Winter (Jan-Apr) [] Spring (May-Aug) [] Intersession (May-Jun) [] Summer (Jul-Aug)
[] Self-paced/PhD/Masters: ____/____/____ to ____/____/____ (Periodic progress updates required)
Day Month Year Day Month Year
REMINDER: Verification of Enrollment required when submitting SACC for Intersession and Summer.

Textbook advance needed? [] Yes [] No if yes, amount requesting (up to \$500): _____

Are you due to graduate at the end of this semester/term? [] Yes [] No if yes, when? _____

I will notify the Nunatsiavut Government-Education Division of any and all changes to my student/program status.
I will ensure the Nunatsiavut Government-Education Division receives a copy of my most recent transcript of marks or grade report as soon as it is available after each semester that I am a sponsored student.

Signature: _____ Date: ____/____/____

Verified by: _____ Date: _____
SVF Sent by: _____ Date: _____
Notes: _____
Revised June 2024