

Application for Community Cultural Initiatives Program

Kivalliq Inuit Association

Instructions:

*Please print or type when completing this form

*Attach a separate sheet to this application, if needed

*Submit application to: Kivalliq Inuit Association
Social and Cultural Development Department
PO Box 340
Rankin Inlet, Nunavut

Direct

X0C 0G0

Email:

Ph. (867) 645-5726

Fax: (867) 645-2348

aaupaluktuq-burton@kivalliqinuit.ca

Title of project/program:

ANNUAL INTAKE OF APPLICATIONS

	Open for intake	Closing dates
Spring/Summer Activities	April	Mid May
Fall/Early Winter activities	Mid July	September 30th
Early Winter Activities	September/October	Mid November
Winter	Mid November	January 30th

Type of Application

Language Preservation

Land Skills

Traditional Skills

Other/Specify

Contact Information

First Name

Last Name

Group name (if applicable)

Mailing Address

Community

Postal Code

PO Box

Phone Number

Fax Number

Email Address

Project Schedule

Please state your expected start and finish dates. Also provide a schedule for completing each steps in your project

Who will benefit?

Youth	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Elder Involvement <input type="checkbox"/>
Women	<input type="checkbox"/>		
Men	<input type="checkbox"/> Approx # of participants		
Children	<input type="checkbox"/>		

Assistance from other sources

List any other assistance **secured** for your project

Name of source	Contact Name	Dollar Value (\$)

List any other assistance **requested** for your project

Name of source	Contact Name	Dollar Value (\$)

Total of other sources: \$

References

You must enclose at least two (2) letters of support with your application.
 Please list below the persons who provided these letters of support.
 These letters will contribute to the success of your application.

Name	Organization	Telephone Number

Project Budget

You must provide a detailed budget breakdown of cost by category
 ex) rental, wages, supplies etc.

Description	Dollar value
Total Budget	\$
Total requested from KIA	\$

Applicant's Statement

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and ability, and that I do not have any outstanding debts to the Kivalliq Inuit Association.

I agree to release my ATV,boat, outboard motor, snowmobile,cabin and all

I, further agree that KIA is not responsible for damages that may occur

Signature: _____ Date: _____

Witness: _____ Date: _____

***PLEASE BE ADVISED THAT ONLY APPROVED APPLICATIONS
WILL BE CONTACTED IN WRITING- UNAPPROVED APPLICATIONS
WILL NOT BE NOTIFIED***