





Somebody's Daughter 2019

Participant Application Form

Please note that the selected participants of Phase 1 will also be involved and take part in Phase 2 which will be located possibly out on the land for approximately 10-12 days We will decide as a group in Phase 1.

Personal Information

Full name	
Home address	
Community	
Home phone/Work/Cell	
e-mail address	
Birthday (MM/DD/YYYY)	

Emergency and Medical Information

In case of emergency, contact person	
Emergency contact's phone	
Known medical conditions	
Known allergies	
Current medications	

In this section, please write briefly why you want to take part in somebody's Daughter. You may write in Inuktitut or English:		
Wille in manufaction of English		
	ghter Program is to care for and respect others, to have participants, and to be open to lifelong learning:	
Furthermore I,	will take responsibility for my own actions.	
If you agree with this mission staname below:	atement & you are committed for the <u>2 Phases</u> , please sign your	
Signature of Applicant	Date	
	rms to your local CLO Office or directly to KIA at (867) 645-	

Please fax or bring completed forms to your local CLO Office or directly to KIA at (867) 645-2348 or e-mail to dpanika@kivalliqinuit.ca or stutanuak@kivalliqinuit.ca Attention: Daisy Panika/Samson Tutanuak

If you have any questions please feel free to call us at (867)645-5725 or Toll free at 1-800-220-6581

DEADLINE FOR APPLICATION INTAKE IS AUGUST 2nd, 2019 at 5:00pm (CST)

Please note only selected applicants will be contacted