



**YELLOWKNIVES DENE FIRST NATION
HIGH SCHOOL ACHIEVEMENT AWARD APPLICATION**

Date Received: _____

This award is available to Yellowknives Dene First Nation Members only. Application requirements are as follows:

- Fully complete application
- Provide Official Transcripts
- Provide photocopy of Treaty Card
- Provide copy of Diploma/Certificate

Please submit applications with attached requirements to YKDFN Human Resources. Mahsi cho!

APPLICANT INFORMATION:		
<i>Last Name:</i>	<i>First Name:</i>	<i>Middle Name:</i>
<i>Residential Address and Mailing Address:</i>		
<i>Community/City:</i>	<i>Terr/Pro:</i>	<i>Postal Code:</i>
<i>Date of Birth (M/D/Y):</i>	<i>Telephone #</i>	<i>Cell #</i>
<i>YKDFN Treaty Registration No:</i> 763	<i>E-mail Address:</i>	
<i>What type of employment/career are you interested in?</i>		
GRADUATION INFORMATION:		
<i>Name of High School:</i>		
<i>Street Address/Mailing Address:</i>		
<i>Community/City:</i>	<i>Terr/Pro:</i>	<i>Postal Code:</i>
<i>Date of Graduation (M/D/Y):</i>	<i>Did you receive a diploma or leaving school certificate? (Check one and attach copy):</i>	<input type="checkbox"/> <i>Diploma</i> <input type="checkbox"/> <i>Certificate (Leaving School)</i>

The information I, the above Applicant, have provided is true and complete to the best of my knowledge, and understand it may be subject to verification. Also, I consent to disclose my student information to the Yellowknives Dene First Nation (YKDFN) for the sole purpose of determining my eligibility for an YKDFN High School Achievement Award, and if granted as a recipient, YKDFN may disclose information to promote and advertise the YKDFN High School Achievement Award Recipients.

I further understand that this information will be kept confidential and any information received will be kept in a secure fashion and will not be released to any other person/organization or agency for any purposes.

Applicant Signature: _____ **Date:** _____

YKDFN USE ONLY		
<i>Comments:</i>		
<i>Date Reviewed:</i>	<i>Review Prepared By:</i>	<i>Application is:</i> <input type="checkbox"/> Approved <input type="checkbox"/> Denied

YKDFN Authorized Signature: _____ **Date:** _____