



Lac La Ronge Indian Band
2018
Summer Student
Employment Program Application:
Post-Secondary Students

Application Deadlines: June 8, 2018

Post-Secondary Education

Post Office Box 399

AIR RONGE, SASKATCHEWAN S0J 3G0

Office Phone: (306) 425-4938 Office Fax: (306) 425-3030

Email: summer_employment@llribedu.ca

STUDENT NAME: _____

For office use only:

Date Received: _____

Received by: _____

FAX

Mail

Dropped off

Other _____

LA RONGE INDIAN BAND
APPLICATION FOR SUMMER STUDENT EMPLOYMENT PROGRAM

Eligibility

Must be a member of the LLRIB.

Must be a current post-secondary funded student, and returning to school in the fall

Must have a Social Insurance Number (SIN#)

Must be 15-30 years of age in the 2018 calendar year

Criminal Record and Child Abuse checks may also be requested at any time during the application and/or employment period.

Applications must be received by the deadline dates

Applications must be complete in order to be considered

Application Deadlines: June 8th 2018

Application documentation attached, please provide comment if PENDING:

On file PENDING

A cover letter

A copy of your most current resume with references

A copy of your letter of acceptance or Class Registration

Privacy Act Statement

The information you provide on this document is for the purpose of resourcing and administering Summer Student Employment. Personal information that you provide is protected under the provision of the Privacy Act.

STUDENT INFORMATION (Please Print, illegible writing will cause a delay in processing your application)

First Name: _____

Middle Name: _____

Last Name: _____

Alias / Nickname: _____

Treaty#: _____ (Please provide all 10 digits)

SIN#: _____

Date of Birth: Month _____ Day _____ Year _____

Sex: Male Female

Must provide valid E-mail Address: _____

Cell phone number: (____) _____ - _____ Call & Text Text only

Land line phone number: (____) _____ - _____ Not Available

Contact person name: _____

Phone # for contact: (____) _____ - _____

Mailing Address: _____ City/Town: _____

Prov. _____ Postal Code: _____

House Address: _____ Street: _____

City/Town: _____ Prov. _____

Must identify a home Community:

- Hall Lake
- Sucker River
- La Ronge

Will you be returning to your studies in the Fall 2018?

Were you a previous Summer Student with the Lac La Ronge Indian Band? YES NO

If YES, Where did you work? _____

Preference of Placement (Ex- Youth Haven, Recreation, Bands Department, Band Business): _____

Do you have a valid Driver's License? YES NO

Do you have First Aid/ CPR Training? YES NO Expiry date _____

Do you have Safe Food Handling Certificate? YES NO Expiry date _____

Do you have a Boat License? YES NO

Do you have Play Leadership certificate? YES NO Expiry date _____

Other Training Courses completed: _____

Please read and ***initial each*** of the following:

____ I declare that the information provided by me on the application form is complete and correct to the best of my knowledge.

____ I understand that a false statement may disqualify me from employment, or cause my dismissal.

____ I hereby give permission to the Lac La Ronge Indian Band Post-Secondary Summer Student Employment Program to verify or confirm with any source the correctness and accuracy of the information contained in this application.

Student Signature: _____

Date: _____

Thank you for applying with the Summer Student Employment Program, however only selected applicants will be contacted. We encourage you to apply again in the future.