



## PART II – APPLICATION FORM

### A. Applicant/Contact Information

Your full name: \_\_\_\_\_  
*Last First Middle*

NWT Home  
Address: \_\_\_\_\_  
*Address City/Town Postal Code*

Address  
while at  
school: \_\_\_\_\_  
*Address City/Town Postal Code*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### B. Academic Studies Information

Degree/Diploma Program Name: \_\_\_\_\_

College/University Name: \_\_\_\_\_

Location of College/University: \_\_\_\_\_

Program start date: \_\_\_\_\_ Program end date: \_\_\_\_\_

Course Load<sup>3</sup>:      Full-time       Part-time

Please indicate if you are planning to pursue a career in the Northwest Territories in the field of early childhood development:      Yes       No

<sup>3</sup> Full-time programs must meet the minimum requirement of at least 40% of a 100% full course load as a student with a permanent disability or 60% of a 100% full course load.



### C. Declaration:

I, \_\_\_\_\_, certify that the information I have provided is true and accurate. I understand that scholarships are awarded for use in the current academic year only. I further understand that if successful in my application, any tax implications or considerations will be my responsibility and that I must be in good financial standing with the GNWT to receive payment.

All of the responses and information provided will be kept confidential and will be protected under the *Access to Information and Protection of Privacy Act*, section 40.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

If you are awarded a scholarship, your MLA may wish to obtain your contact information for the purpose of acknowledging your achievement. Do you agree to the release of your contact information for this purpose?

Yes  No

I acknowledge that, if I am a recipient of the *Right from The Start Early Childhood Development Scholarship Program*, my name and image may be used to raise awareness of the Program and its objectives, and that I will be expected, if able, to participate in events to achieve these objectives. I agree to these terms.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## PART III - PREPARE YOUR APPLICATION PACKAGE

Please ensure your package includes the following:

- \_\_\_ Application Form (A, B & C)
- \_\_\_ Letter of Acceptance or Conditional Acceptance
- \_\_\_ Information on diploma or degree program
- \_\_\_ Proof of NWT Residency (2 pieces)
- \_\_\_ Copy of Academic Transcripts (if applicable)
- \_\_\_ Letter of Intent

## PART IV - SUBMIT YOUR APPLICATION PACKAGE

**All documents must be received by the deadline of 5:00 P.M. MST on October 15, 2021.**

Email your complete application package to [rightfromthestart@gov.nt.ca](mailto:rightfromthestart@gov.nt.ca).