



## APPLICATION FOR MENTOR-APPRENTICE PROGRAM (MAP)

The Mentor-Apprentice Program (MAP) is a way of learning a language where a fluent speaker of the language (a mentor) teaches a committed language learner (an apprentice) through immersion. The goal of the program is to have Apprentices increase their ability to understand and speak their language. Spoken language is the focus of the program.

To be eligible, applicants must be 18 years of age or older. Priority will be given to Indigenous applicants that reside in the Northwest Territories and those with a demonstrated commitment to sharing language with others upon completion of the program.

This program is open to learners of all levels. Ten pairs per Indigenous Government partnership will be selected to participate. MAP pairs must complete this application together.

*Une version française de ce document est disponible.*

Apprentice Information	
Last Name:	First Name:
Middle Name(s):	Date of Birth (yyyy/mm/dd):
Mailing Address (include no., street, apt. no., PO box, postal code):	
City/Community:	Province/Territory:
Phone:	Email:
Do you identify as an Indigenous person (i.e., First Nation, Inuit, Métis) <input type="checkbox"/> Yes <input type="checkbox"/> No	
1. Please indicate your Indigenous language group:	<input type="checkbox"/> Inuinnaqtun/Inuvialuktun Inuvialuit Regional Corporation <input type="checkbox"/> Dinjii Zhu Ginjik Gwich'in Tribal Council <input type="checkbox"/> Dene Kədə Sahtú Dene Council <input type="checkbox"/> nēhiyawēwin/Dēne Sų́łíné Northwest Territory Métis Nation <input type="checkbox"/> Dene Zhaté Dehcho First Nation <input type="checkbox"/> Tłı̨chǫ Tłı̨chǫ Government <input type="checkbox"/> Dēne Sų́łíné/Tłı̨chǫ/nēhiyawēwin Akaitcho Territory Government
2. What is your current language level?	<input type="checkbox"/> <b>Emergent</b> (have no language knowledge. May know some words and phrases such as colours, numbers, or greetings.) <input type="checkbox"/> <b>Beginner</b> (have a little language knowledge, including basic phrases. Understand more than can speak.) <input type="checkbox"/> <b>Intermediate</b> (have some language knowledge. Can have simple conversations in the language.) <input type="checkbox"/> <b>Advanced</b> (have extensive language knowledge in areas of language experience. Can take part in daily conversations with some ease and fluency.)
3. Describe any past or present involvement with language related activities. (e.g., participate in community language programs, teach your children basic greetings, linguistic courses, etc.)	

4. What is your relationship to your mentor?

<input type="checkbox"/> Relative (i.e., daughter, nephew, cousin.)	<input type="checkbox"/> Community Member
<input type="checkbox"/> Friend	<input type="checkbox"/> Other _____
<input type="checkbox"/> Colleague	

5. What is your current employment status?

<input type="checkbox"/> Employed Full-time	<input type="checkbox"/> Post-secondary Student Full-time
<input type="checkbox"/> Employed Part-time	<input type="checkbox"/> Post-secondary Student Part-time
<input type="checkbox"/> Stay-at-home Parent	<input type="checkbox"/> Retired
<input type="checkbox"/> Unemployed	<input type="checkbox"/> Other _____

6. Describe your language learning goals. *(language goals can be related to topics you would like to learn about, e.g., introducing yourself, having conversations in your language, getting your children dressed using your language, or based on feelings, e.g., feeling more connected to your relatives, feeling more confident speaking your language, etc.)*

7. List the topics or areas of interest you will focus on during this program. *(e.g., daily household activities, salutations and greetings, common expressions and commands, or learning language on the land, etc.)*

## Program Outline

Over the course of the program you will be working towards completing up to 200 hours of language immersion time. Please consider how you would plan your learning sessions for a typical month.

Fill in the approximate number of hours per day and the weekly total your MAP pair would complete. You should complete approximately 7-10 hours of language immersion each week. For example: Sunday 3 hours, Wednesday 1.5 hours, Friday 2.5 hours for a total of 7 hours.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Weekly Total Hours
Week 1								
Week 2								
Week 3								
Week 4								

1. Describe how your MAP pair will work together to complete your language immersion hours. *(e.g., cook and eat meals together, listen to elder stories, look at photo albums together, practice traditional activities like fileting fish together, etc.)*  
How will your MAP pair balance your home, work and community responsibilities with your MAP language learning *(keeping in mind that you will need to spend 7-10 hours together per week?)*

## Mentor Information

Last Name:

First Name:

Middle Name(s):

Mailing Address (include no., street, apt. no., PO box, postal code):

City/Community:

Province/Territory:

Phone:

Email:

## Mentor Language Experience

1. What is your fluency level? (check all that apply)
- |  |                                |
|--|--------------------------------|
| <input type="checkbox"/> First Language  | <input type="checkbox"/> Speak |
| <input type="checkbox"/> Second Language | <input type="checkbox"/> Read  |
|  | <input type="checkbox"/> Write |
2. Have you been a MAP Mentor before?  Yes  No If yes, what year did you complete the program in?
3. What is your current employment status?
- |  |   |
|--|---|
| <input type="checkbox"/> Employed Full-time  | <input type="checkbox"/> Post-secondary Student Full-time |
| <input type="checkbox"/> Employed Part-time  | <input type="checkbox"/> Post-secondary Student Part-time |
| <input type="checkbox"/> Stay-at-home Parent | <input type="checkbox"/> Retired                          |
| <input type="checkbox"/> Unemployed          | <input type="checkbox"/> Other _____                      |
4. Describe any current involvement you have with language teaching and learning. (e.g., participate in community language programs, linguistic courses, etc.)

## Training Workshop

A mandatory training workshop will be held for MAP pairs. To participate in the program both the Apprentice and Mentor must attend the workshop. Travel costs for the training workshops are covered by the GNWT, and may involve travel to another community or regional centre.

Apprentice:	<input type="checkbox"/> I will be able to attend
Mentor:	<input type="checkbox"/> I will be able to attend

## Declaration and Consent

- We certify that the information we have provided is true and accurate.
- We understand that if we're accepted into program, our names and images may be used to raise awareness of the program and its objectives, and that we will be expected, if able, to participate in events to achieve these objectives. We agree to these terms.
- We understand that our information is being collected under the authority of the *Official Language Act* and *Access to Information and Protection of Privacy (ATIPP) Act*, Section 40(1)(c), and will be used to determine our eligibility for MAP and for the general administration and enforcement of this program. The privacy provisions of the *ATIPP Act* protect my information, and we have the right to examine and request correction of our records and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection of the information, contact the Director of Indigenous Languages and Education Secretariat, Department of Education, Culture and Employment at 867-767-9364.

X

Apprentice Signature

(yyyy/mm/dd)

X

Mentor Signature

(yyyy/mm/dd)

## Application Checklist

Please ensure you include the following documents to be considered for MAP. If you need help with completing your application or any of the supporting documentation, please contact a MAP Project Coordinator at [Indigenous\\_languages@gov.nt.ca](mailto:Indigenous_languages@gov.nt.ca).

- Mentor-Apprentice Program (MAP) Application Form
- Letter or video of intent from the apprentice (*your 1-2 page letter or video should clearly outline your commitment to your language and interest in the program. Include why you want to learn your language, why do you think the MAP program will work for you, and specific intentions to pass on the language.*)
- Resume of the apprentice (*your resume should be 1-2 pages*)
- A letter of support for the MAP pair. (*this letter is ideally written from a respected community member, local official, or educational leader. The letter should not be from an immediate family member.*)

## Submit your Application

Please complete this form and send it and your supporting documentation to by the deadline to:

Email: [Indigenous\\_languages@gov.nt.ca](mailto:Indigenous_languages@gov.nt.ca)

Mail:

Indigenous Languages and Education Secretariat  
Department of Education, Culture and Employment  
Government of the Northwest Territories  
P.O. Box 1320  
Yellowknife, NT X1A 2L9