

Pulling in The Net, We Need Your Help!

February 6th, 2017, 6:00pm, Tseshahat Great Room



Come to share your
opinions and input!

Your opinion is
valued.

DOOR PRIZES!

Some of our best times of unity & working together is during summer fishing time. The way we work together to provide for our community is one of many Tseshahat strengths & a great source of community and pride.

In many ways creating our community plan is a lot like "Pulling in the Nets" as we work together and give what we can to harvest and feed our future.

It will take many hands to create a good plan. We need ALL kinds of voices, perspectives, concerns and contributions to "Pull in" what is strongest and best in our community and create a plan for our community

This Monday we are "Pulling in the Net" at 6pm

Tseshahat Great Room - Sandwiches and Snacks provided

Lets come together to harvest: our strengths, dreams, hopes, ideas and concerns that will help us develop common goals & actions for the future

COME OUT! JOIN the conversation!

Don't sit on the beach and miss out on the fun! Help us "Pull in the Net"

Imagine what we can do if we all put in our best efforts to "Pull in" the best of what we are and the best of what we want to see?

For More information email: contact@whiteravenconsulting.ca

Join our BRAND NEW: "Our Best Past, Our Best Future: Tseshahat CCP Project" Facebook Page!!

What is this for?

A Community Comprehensive Plan (or CCP) is a plan created from the perspectives of the community to create a Tseshahat direction forward that is built by working and talking together.

A CCP establishes a vision of where the community would like to go and identifies what actions are needed to get there.

What is a Comprehensive Community Plan?

Tseshahat First Nation had a **Comprehensive Community Planning** (CCP) drafted in 2013.

Since then our community has had a lot of change and growth – so it is the perfect time community planning is an important process and in 2016 we began a process of updating and revising our CCP.

Every Tseshahat member needs to have a voice in shaping our future. To gather Tseshahat input we will be:

- Holding gatherings for discussion.
- Conducting a community survey
- Contacting individuals and families
- Posting information to social media pages and the Tseshahat Webpage
- Attending community events

For more information email contact@whiteravenconsulting.ca



Why is a Comprehensive Community Plan important for Tseshahat?

- Our Tseshahat community is quickly growing.
- Community engagement is important: with this growth along with dynamic changes in our communities there are many BIG decisions in front of us.
- Updating our CCP gives Tseshahat membership a chance to discuss, provide input, put forward concerns and identify priorities create their plan expressing common hopes, dreams and plans to put into action.
- A CCP allows us opportunities to use our resources better effectively and more easily access new resources to support the vision & needs of community.



TSESHAHT WILLS & ESTATES WORKSHOP:

Do you need a Will? Information provided to help you decide, plus tips on how to write a Will if you need one. Wills Kit and instruction booklet given to all participants.

When: Wednesday February 8th
10:00 - Noon
6:00 – 8:30 pm

Where: Tseshaht Boardroom 3

Also available:

PRIVATE APPOINTMENTS

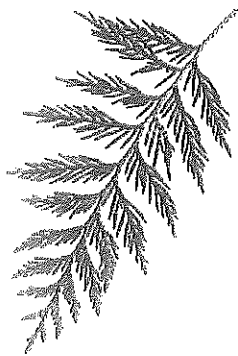
February 8th – 2 – 5 pm.

If you are the Executor or Administrator of an estate and have questions about what to do, you can book a private appointment with the Estates Officer, Rosemarie Cooper, to get help. Contact Jane Jones at the Tseshaht Band Office for more information or to book an appointment.

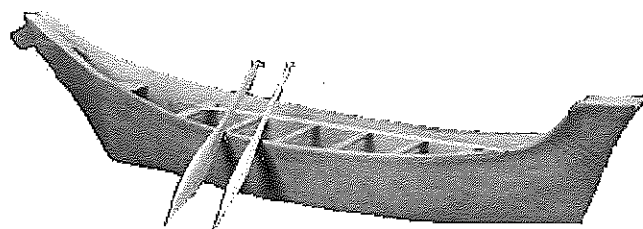
First Nation's Health Authority Environmental Public Health Services would like you to be aware of an outbreak of gastrointestinal illness associated with consuming raw or partially cooked oysters.

The British Columbia Center for Disease Control (BCCDC) has advised that, since December 2016, there has been an increase in gastrointestinal illness reported by people that have consumed raw or partially cooked oysters. Oysters should be cooked to an internal temperature of 90° C for 90 seconds to avoid illness. If you become ill, take precautions to minimize the spread to others, so they do not become ill. If you become ill with diarrhea and vomiting after eating shellfish you should call BC HealthLink at 811.





NTC Post-Secondary Funding



The Nuu-chah-nulth Tribal Council's Education Department is now accepting applications for studies beginning between September 2017 and January 2018. If you are interested in attending Post-Secondary please be sure to submit an application before the following deadline:

March, 01, 2017

Who can apply: If you are a registered member of any of the following Nuu-chah-nulth Nations: Ditidaht, Ehattesaht, Hesquiaht, Hupacasath, Mowachaht/Muchalaht, Nuchatlaht, Tla-o-qui-aht, Tseshaht and Uchucklesaht.

For more information please contact NTC Post-Secondary Counsellor, Charlene Miller:

NUU-CHAH-NULTH TRIBAL COUNCIL POST SECONDARY EDUCATION
5001 Mission Road - PO Box 1383, Port Alberni BC., V9Y 7M2
Phone: (250) 724-5757 / 1-877-677-1131 Fax: (250) 724-9682

Email: psinfo@nuuchahnulth.org



**Nuu-chah-nulth Tribal Council
Post Secondary Funding Application**

PO Box 1383, Port Alberni, BC, V9Y 7M2, Tel: (250) 724-5757, Fax: (250) 724-9682

Thank you for expressing your interest in pursuing post-secondary sponsorship through the Nuu-chah-nulth Tribal Council. Below is a list of items that are required to complete general applications.

New Students

Submit the following in order to have your application considered for funding:

- ☐ Signed Funding Agreement
- ☐ 2015 Tax Assessment Summary for yourself and your spouse (only if you have dependents)
- ☐ Consent to Release Information
- ☐ NTC Direct Deposit Form
- ☐ Void Cheque or Direct Deposit Notification Form (only needed from new students and continuing students if your banking information has changed)
- ☐ English Assessment
- ☐ Math Assessment
- ☐ Acceptance Letter
- ☐ 5 Job postings or offer of employment (Technical Vocational Training, TVT, Funding only)

Continuing or Returning Students

Submit the following in order to have your application considered for funding:

- ☐ Signed Funding Agreement
- ☐ 2015 Tax Assessment Summary (only if you have dependents)
- ☐ Consent to Release Information
- ☐ NTC Direct Deposit Form (only if your banking information has changed, or you haven't been sponsored in the past year)
- ☐ Void Cheque or Direct Deposit Notification Form (only needed from new students and continuing students if your banking information has changed)
- ☐ Most Recent Transcripts
- ☐ Acceptance Letter (only if you are a returning student)
- ☐ Record of Degree Completion (RDC); indicates the student's plan to satisfy the requirements for their degree (for students in their 3rd year of post-secondary studies, not including upgrading)
- ☐ 5 Job postings or offer of employment (Technical Vocational Training, TVT, Funding only)

Important Note: Any institution tuition deposits that are required prior to a student's application being approved need to be covered by the student and will be reimbursed once the student's application is approved.

Fax: (250) 724-9682

Email: Charlene Miller, NTC Post-Secondary Counsellor, psinfo@nuuchahnulth.org

Mail: PO Box 1383, Port Alberni, BC, V9Y 7M2

If you have any questions please call the Post-Secondary department at (250) 724-5757 or toll-free at 1-877-677-1131.



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Nuu-chah-nulth Tribal Council Post-Secondary Funding Application

APPLICATION DEADLINE DATES	
CHECK APPLICABLE MAKE ONLY ONE SELECTION	PROGRAM START DATE MAKE ONLY ONE SELECTION
<input type="checkbox"/> MARCH 1 ST	<input type="checkbox"/> FALL (SEPTEMBER) ENROLLMENT
<input type="checkbox"/> AUGUST 1 ST	<input type="checkbox"/> WINTER (JANUARY) ENROLLMENT

Part One: Student Information			
Birth date (i.e. May 10, 1973)			
Last Name		Previous Last Name(s)	
First Name		Previous First Name(s)	
SIN (Social Insurance #)			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-Law <input type="checkbox"/> Separated <input type="checkbox"/> Divorced		
First Nation			
IRN (Indian Registry / Status Number)			
Mailing Address		Other Contact Information	
Address		Phone #	
City		Cell #	
Province, Country		E-mail address	
Postal Code			

Part Two: Dependent Information			
Name	Relationship (spouse, son,	Birth date (i.e. November 2,	Gender
			<input type="checkbox"/> M <input type="checkbox"/> F
			<input type="checkbox"/> M <input type="checkbox"/> F
			<input type="checkbox"/> M <input type="checkbox"/> F
			<input type="checkbox"/> M <input type="checkbox"/> F
			<input type="checkbox"/> M <input type="checkbox"/> F



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Part Three: Financial Information, if claiming dependents			
Personal Income	\$	Spousal Income	\$
Household income per year is (check)	<input type="checkbox"/> less than \$15,000 <input type="checkbox"/> \$15,000 to \$19,999 <input type="checkbox"/> \$20,000 to \$29,999 <input type="checkbox"/> \$30,000 to \$39,999 <input type="checkbox"/> \$40,000 and over		
IMPORTANT: Does your program require additional supplies? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate approximate cost and attach supporting documentation: \$			
Have you received a "Passport to Education"? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the value of your passport to education? \$			

Part Four: Institution and Program Information			
Institution and Campus			Student Number
Program			Online Account/Password
Year of Study			Program Length
Program Type/Level	<input type="checkbox"/> UCEPP (College Prep/ABE)	PSSSP-LEVEL 1 <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma	PSSSP-LEVEL 2 Undergraduate degree program <input type="checkbox"/> BA <input type="checkbox"/> BSc <input type="checkbox"/> BEd Other : _____
	PSSSP-LEVEL 3 <input type="checkbox"/> Advanced or Professional Degree Programs or <input type="checkbox"/> Master's Program	PSSSP- Level 4 <input type="checkbox"/> Doctoral Program	Enrolled in: <input type="checkbox"/> Full-time Studies <input type="checkbox"/> Part-time Studies
Semester Funding (please check all that apply) <input type="checkbox"/> Sep - Dec <input type="checkbox"/> Jan - Apr <input type="checkbox"/> May - Aug <input type="checkbox"/> Other dates (specify):		Student Type (check one) <input type="checkbox"/> New <input type="checkbox"/> Continuing <input type="checkbox"/> Returning <input type="checkbox"/> Technical Vocational Training (TVT)	



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Part Five: Other Information

Disability Status
(check one)

☐ Long Term Disability ☐ Short Term Disability ☐ Not On
Disability
☐ Learning Disability

Have you submitted the required disability documentation? ☐ Yes ☐ No

Have you been a resident of Canada for the past 12 consecutive months?

☐ Yes ☐ No

Part Six: Additional Educational Information

What is the highest level of education you have completed (list any courses, certificates, diplomas that you have completed up to this point): ☐ ABE or Upgrading ☐ Certificate ☐ Diploma

☐ BA/BSc/LLB ☐ MA, LLM

☐ PhD ☐ PDP ☐ Other: _____

Have you been previously sponsored by NTC for Post Secondary or TVT?

If Yes, please provide us with details such as dates, institution, program name, transcript.

For the upcoming funding year, I plan to complete the following courses / year of program:

My Long Term Goal is (provide as much detail as possible):

Have you taken any dual credit courses?

If yes, please name them and outline how the dual credit was through.

Have you ever been "Suspended" from NTC P/S funding or on "academic probation"?

If so, what have you done since that time to help ensure you are more successful?

I provide my consent to allow the NTC Post Secondary office to request information from MCFD, Usma, MEIA and NTC Social Development program for the sole purpose of determining eligibility for P/S funding.

I confirm that the above information provided is complete and accurate. I accept responsibility for satisfying the academic requirements of the above institution and managing the education funds to the best of my ability.

Student Signature _____

Date _____

NOTE: You will receive a letter outlining information needed to complete your application. This letter will arrive within 9 weeks of the application deadline. If you do not receive this letter, please contact our office.



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Funding Agreement

Your responsibilities are:

1. Meet with the NTC P/S Counsellor and ensure the school and program you have chosen to attend or are attending is the best choice to fulfil your educational goals.
2. To attend class on a regular basis. Continual absence may result in failing grades and your funding being suspended.
3. **Complete all NTC sponsored courses and programs with a minimum "C" grade or better and who are meeting the requirements of the institution. Failed and/or incomplete courses will NOT be paid for by Nuu-chah-nulth Tribal Council Post-Secondary Program.**
4. **Students in their first year of funding are required to maintain a course load of three (3) courses and/or nine (9) credits with a minimum of a "C" grade or better and who are meeting the requirements of the institution, will remain on probation to continue receiving funding.**
5. **Continuing students are to maintain a course load of four (4) courses and/or twelve (12) credits per semester and maintain a minimum of a "C" grade or better and who are meeting the requirements of the institution to continue receiving funding.**
6. **Students in their first year of funding must provide an interim report for all courses no later than the sixth week of their first term. No further funding will be released until this report is received.**
7. To submit both an interim report (unofficial transcript) and an official transcript according to the schedule provided as part of your approval package:
8. To comply with the Nuu-chah-nulth Post Secondary Policy and Procedures (available online @ www.nuuchabnulth.org).

I, _____, have read and understand the above and agree to these conditions and requirements. Further, I understand that failure to fulfil these requirements and conditions may result in my funding being suspended.

Student Signature

Date



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Post Secondary Funding Application

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NTC P/S CONSENT TO RELEASE INFORMATION

Personal Information			
First Name		Last Name	
SIN (Social Insurance #)			
Mailing Address		Institution Information	
Address		Institution	
Phone #		Student #	
City		Institution	
Province, Country		Address	
Postal Code			

- A. I provide my consent to allow the Nuu-chah-nulth Post Secondary Education department to request copies of information from the Educational Institution listed above for the sole purposes of determining my eligibility for Post Secondary Funding.
- B. I provide my consent to allow the Nuu-chah-nulth Post Secondary Education department to request copies of information from the Ministry of Children and Family Development and the Usma Child and Family Services program for the sole purposes of determining my eligibility for Post Secondary Funding.
- C. I provide my consent to allow Nuu-chah-nulth Post Secondary Education department to share information about my P/S or TVT funding with my First Nation.
- D. I provide consent to allow the Nuu-chah-nulth Post Secondary department to discuss my funding application and file with:
- ☐ my parents and/or guardian Name: _____
- ☐ Nuu-chah-nulth Employment and Training Program
- ☐ Other _____

Signature

Date

For Office use Only:

The Nuu-chah-nulth Post Secondary Education Department is requesting the following information as permitted by the above signed Consent to Release Information Form:

☐ Transcripts for the period between _____ and _____

☐ Other: _____

Please forward the information to the following:

Mail: PO Box 1383, Port Alberni, BC, V9Y 7M2

Fax: (250) 724-9682 or (250) 723-0463

Email: psinfo@nuuchahnulth.org



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Nuu-chah-nulth Tribal Council

Direct Deposit – Post Secondary

Student's Name: _____

I hereby authorize the Nuu-chah-nulth Tribal Council to deposit to the account indicated below.

Signature

Date

Email address

Payment advices will be emailed if an address is provided; otherwise a copy will be retained in our records for pickup.

Name of Bank:
Bank Address:
Bank Phone Number:
Account Number:
Bank Number:
Transit Number:
Sample Void Cheque Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No

The NTC is not responsible for inaccurate or incomplete bank information that results in delayed payment.

00016454	00160-804	11-011-811-01
Cheque Number	Transit Number	Financial Institution
		Account Number

Jan 11, 2017