The Nunavik Internship Program

Eligibility criteria*

- Be an Inuk Nunavimmiuq;
- Have graduated high school;
- Be between 18 and 35 years of age.

Individuals who demonstrate strong motivation and great potential to succeed in this program, but do not match the previous criteria, might be considered.

Remember, post-secondary education is THE priority within Pijunnaqunga! If you recently made the decision to leave post-secondary school, you must have been out of school for at least 6 months prior to applying for Pijunnaqunga.

Documents required for application:

- Completed application form;
- Two completed reference forms.

GENERAL INFORMATION

How did you hear about Pijunnaqunga? ☐ ☐ Web ☐YES/LEO ☐Pijunnaqunga team ☐Other:_____

Are you an inuk Nunavimmiuq?	YES ☐ NO ☐	JBNQA Beneficiary number							

First Name	Last Name	Gender	Date of birth Year/Month/Day
		Male ☐ Female ☐	/ /

If you usually use a name other than the one on your birth certificate or if you use your spouse's last name or both last names, enter it here.	Other First Name	Other Last Name

Marital status	Single ☐	Married/common law ☐	Separated ☐	Widow ☐	Social insurance #								

Address/PO box #	Community	Province	Postal Code

Phone number(s)		Email address
Home: ( ) -	Other: ( ) -	

When is the best moment to contact you? ☐AM ☐PM ☐Evening	How?	Phone ☐ Email ☐ ☐:_____ « Facebook » name ☐Other? _____

Emergency contact

First Name	Last name	Relation to the applicant

Phone number(s)		Email Address (optional)
Home: ( ) -	Other: ( ) -	

CRIMINAL RECORD

Do you have a criminal record?	YES ☐ NO ☐ I don't know ☐

* By applying to this program, I agree to have my criminal record checked.

PIJUNNAQUNGA

The Nunavik Internship Program

MOBILITY INFORMATION

Are you available to attend an interview session (up to 5 days) and a 2-week training in another community?	YES ☐ NO ☐
Are you available to move to another community for the duration of an internship (up to 12 weeks)?	YES ☐ NO ☐

CURRENT SITUATION

Are you employed? ☐YES ☐NO	If YES, ☐ Full time ☐ Part time <30h ☐ Self-employed Employer:_____
	If NO, Do you benefit from ☐ Employment Insurance or ☐ Social Assistance? ☐ NO

Does your state of health allow you to work?	☐ YES ☐ NO If NO, why?_____
Do you have a physical or an intellectual limitation or a mental health issue?	☐ YES ☐ NO If YES, specify:_____

Do you have dependents? ☐ YES ☐ NO	If YES, how many?_____ Do you have access to daycare/childcare ☐ YES ☐ NO
Are you a single mother or father? ☐ YES ☐ NO	Is your spouse employed? ☐ YES ☐ NO ☐ N/A

EDUCATION AND OTHER TRAINING

Did you graduate from high school?	☐YES ☐NO	If YES, which year? If NO, which grade did you complete?	
Are you planning on going to college?	☐YES ☐NO	When? Which program?	
Have you ever been to college?	☐YES ☐NO	When? Which program?	

Did you complete any other training?

Name of the training	Year completed

EXPERIENCE, SKILLS AND COMPETENCES

Work / Volunteering experience

Starting date Year/Month/Day	Finishing date Year/Month/Day	Job title	Name of the employer or business
/ /	/ /		
/ /	/ /		

Other achievement(s)

Achievement(s)	Year(s)

Software

Are you familiar with one or more of these software?	☐MS Excel ☐MS PowerPoint ☐MS Word ☐Other?_____

The Nunavik Internship Program

GENERAL INTERESTS

Favorite subject(s) in school	What made these classes your favorite?

Write a list of your interests and hobbies/sports.

Describe your dream job. Why is it special to you?

COMPETENCIES AND INTERESTS

Describe 3 work-related strengths you have.

Name one aspect of your personal life that you would like to improve and explain why (try to relate it to work.)

Write a short text that describes the reason why you are applying to Pijunnaqunga.

TERMS AND CONDITIONS

By sending this form, I solemnly affirm that the information provided is accurate and complete and I understand that it may be verified. I commit to informing Pijunnaqunga of any changes in this information. I agree to allow Pijunnaqunga to collect and compile my personal information for management purposes and consent to have this information shared with various government agencies.

I have read the terms and conditions and I agree.

Date: _____   **Signature:** _____