

P.O. BOX 12 SANDY LAKE, Ontario P0V1V0

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SUMMER STUDENT EMPLOYMENT 2014

The Chief and Council of Sandy Lake First Nation is seeking students (ages 14-30) who have completed this school year and are enrolled for next school year to apply for employment opportunities for the summer months.

Positions available are in the following programs;

SECURITY
ENVIRONMENTAL PROGRAM
CLERICAL/OFFICE
RECREATION
LOCAL BUSINESSES
HEALTH PROGRAMS

Please hand in your Summer Student Application 2014 to Michelle Goodman (Secretary) or Kenny Goodwin (Executive Assistant) at the Band Office by Wednesday, July 2, 2014 @ 5:00 p.m with Transcripts/Letters from your school to be considered for a summer job. If transcripts or letters from the school is inaccessible, we will accept NNEC sponsorship letter or a letter from a school official to verify school enrollment the following year.

Important Note: Social Insurance Numbers are mandatory.

SUMMER STUDENT APPLICATION 2014

Please fill in all information, it is required during the selection process.

PERSONAL INFORMATION		-	
Name:		Social Insurance	ance Number - mandatory
Band Number and Band		Date of Birth:	:
Did you complete this school year 13-14? []Yes Transcripts requested from:	[] No	Telephone Nur	lumber
Are you enrolled for school next year 14-15? []Y Transcripts/Letters to be faxed to 807-774-1040	'es []No	Area Residency (circle one only) Oldsawmill/GP River Airport/Big Rock RC Centre	
What kind of career are you interested in?		What placement would you prefer?	
EDUCATION AND TRAINING			
Highest Grade Level Completed (circle one)		High School N	Name:
Grade School Name:		riigii School Na	Year Completed:
Year Co	ompleted:	9 10 11 12	
12345676		Did you receiv	eive an OSSD or equivalent? []Yes []No
List any Post Secondary School Diplomas, Degree			
List any Traditional knowledge, formal certificates	or training	programs you h	ı have completed.
WORK EXPERIENCE	List Joh	Title Employer	er and time worked.
WORK DAI DRUDKOL	LIST JOD	Tille, Employer	si and time worked.
REFERENCES (not fam	nily, leave i	name and contac	itact number or address)
1.)			
<u>2.)</u>			
\/L	y swear all	information is tru	true and accurate and authorize a school history
Applicant's Signature:			Date:
School Transcripts attached: []yes []no			

If transcripts cannot be acquired in time, a letter from NNEC or Boarding Parent or School Official will be accepted.