

WHITECAP DAKOTA NATION

SUMMER STUDENT EMPLOYMENT PROGRAM 2024

The Whitecap Dakota First Nation is now actively seeking students to fill various positions within the Community during the summer. Students will be placed in positions based on their skills and abilities. Employment terms are:

- | | | |
|----------------------------|---|---|
| ▪ Post-Secondary Students: | - | Tues, May 21, 2024 – Fri, August 30, 2024 |
| ▪ High School Students: | - | Mon, July 1, 2024 – Fri, August 30, 2024 |

APPLICATION GUIDELINES

- Students **MUST** be currently enrolled in school AND returning to school in the fall.
- Candidates may only enter program twice.
- Must be at least 15 years of age.
- Must live on Reserve
- To determine eligibility under the funding guidelines for the summer student program, students must sign a Consent Form (attached). Signing the form does not guarantee employment, however the First Nation is unable to proceed to the final screening stage until the applicants submit this form.
- The successful candidate will be subject to a Criminal Record Check as a condition of employment.

APPLICATION PROCESS

Submit your application by email to: employment@whitecapdakota.com

- The Subject line must include your name and Summer Student 2024-25
- *You will receive a reply acknowledging receipt of your application.*

APPLICATION DEADLINES

High School Students – June 7th, 2024

Post-Secondary Students – May 21st, 2024

Application must include the following documents

- Incomplete Applications will NOT be considered
- Cover letter and resume
- Confirmation of fall 2024 school enrollment (letter from your school)
- Signed SITAG consent form (the 2nd page of this form)



CONSENT TO DISCLOSE PERSONAL INFORMATION

Full Name:..... Social Insurance #

(Last) (First) (Initials)

Address:
(Street Address)

(City) (Prov.) (Postal Code)

I, consent to the disclosure and use of my personal information for the purposes of:

(a) Assisting the Government of Canada in verifying eligibility for, or entitlement to, insurance benefits under Part I of the Employment Insurance Act and for the purposes of ensuring Section 25 of the Employment Insurance Act which ensures that EI clients who are active EI claimants continue to receive the insurance benefits to which they are entitled.

(b) For use by the Government of Canada in assessing and evaluating the Indigenous Skill and Employment Training Program - First Nations Labour Market Strategy.

For shared Case Management purposes:

(c) If applicable, initial the following: _____ SIIT-SITAG Mental Health and Wellness _____ SIIT Career Centres

For the purposes of part (a) described above, this consent shall remain in force for a period of one year from this date and for the purposes for part (b) described above this consent shall remain in force for a period of six years from the end date of my action plan. For the purposes of information collected for the SIIT-SITAG Mental Health and Wellness or the SIIT Career Centres consent remains in force for one year. This information will be disclosed to the Government of Canada and to the Saskatchewan Indian Training Assessment Group Inc., 118-335 Packham Avenue, Saskatoon, Sask. I understand the information collected and disclosed is protected under Canada's *Privacy Act* and that I have a right under the *Privacy Act* to obtain access to the information from the Government of Canada.

Signature of Applicant:..... Date:

FNLMS Case Manager

Saskatchewan Indian Training Assessment Group (SITAG) Inc. assumes full accountability for the personal information collected from its participants in accordance with applicable privacy legislation including the *Personal Information Protection and Electronic Documents Act (PIPEDA)* and the *Privacy Act*. SITAG is committed to protecting the privacy, confidentiality, accuracy and security of the personal information that it collects, uses, retains and discloses in the course of conducting business.

I, as a representative of the Saskatchewan Indian Training Assessment Group (SITAG) agree to use the information disclosed for the purpose as stated above and not to further disclose this information

Signature: Date: