



## Manitoba Metis Federation Vickar Community Chevrolet Metis Students Award (MMF- Vickar)



Through endowments made by the Manitoba Metis Federation (MMF) and Mr. Larry Vickar of Vickar Community Chevrolet and administered by the Louis Riel Institute (LRI), the Manitoba Metis Federation-Vickar Community Chevrolet Award for Metis Students (MMF-Vickar Award) is available to qualifying Metis students at Red River College in the following programs;

- Automotive Technician
- Business Administration (any year)
- Commerce
- Industry
- Sales Programs
- Marketing Programs
- Introduction to Trades
- Automotive Collision Repair

### Application Process

**Deadline:** October 1

There are **2** application forms – one from Red River College and one from LRI.

1. Complete the Award Application form from Red River College; return it to the institution by the due date.
2. Complete the MMF Vickar Award Application form and return it to LRI by the due date.  
Submit your application via;

Mail	Email	Fax
Louis Riel Institute 103-150 Henry Avenue Winnipeg, MB R3B 0J7	<a href="mailto:lribursaries@mmf.mb.ca">lribursaries@mmf.mb.ca</a>	204-984-9484

### Checklist:

- ✓ Proof that you are eligible as a Metis student (see over for requirements)
- ✓ Your Red River College portion has been submitted by the institution's deadline
- ✓ Your LRI portion has been submitted by the institution's deadline

Once LRI confirms your eligibility as a Metis student, the selection process will continue.

For Inquires please email [lribursaries@mmf.mb.ca](mailto:lribursaries@mmf.mb.ca) or call 204-984-9480



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The following methods are acceptable ways of verifying that you are Metis:

1. A current citizenship in a Metis nation (i.e. MMF)
2. A certified genealogy from the Saint Boniface Historical Society (SBHS)
3. A certified genealogy dated **prior** to December 2014, from the Metis Culture and Heritage Resource Centre (MCHRC)
4. Other methods as approved by the Louis Riel Institute

You may use the proof of someone else in you family as long as you are able to show evidence that you are related to that person. The following are acceptable methods of showing evidence of relationship:

1. Long form birth certificate
2. Baptismal record which lists parents
3. Other methods as approved by the Louis Riel Institute

These items must be attached:

1. If your verification is **Citizenship in a Metis Nation**; provide either:
  - a. A photocopy of your citizenship card
  - b. A letter of confirmation from that nation if your application is being process for either a new card or a replacement card

**OR**

2. If your verification is: a **Genealogy from SBHS**; you will need to provide all of the following:
  - a. A photocopy of the genealogy cover page, showing the SBHS stamp of approval and to whom the genealogy belongs
  - b. A photocopy of the *one* piece of historical ancestral documentation (generally found at the back of the genealogy (i.e. scrip, census)
  - c. A photocopy of the family tree page that shows the relationship of the person whose genealogy it is to the person listed on the historical ancestral document



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## Application Form

### Section 1 - Contact Information

<b>First Name:</b>	<b>Last Name:</b>	<b>Mid Int(s):</b>	<b>Sin #:</b>
<b>Address:</b>	<b>City/Town:</b>	<b>Province:</b>	<b>Postal Code:</b>
<b>Phone #:</b> (primary)	<b>Phone #:</b> (secondary)	<b>Email:</b>	

### Section 2 - Prior Education

<b>High School:</b>	<b>City. &amp; Prov.</b>	<b>Year:</b>
<b>Highest Grade/Diploma:</b>		
<b>Technical Institution/College/University:</b>	<b>City. &amp; Prov.</b>	<b>Year:</b>
<b>Certification received:</b> (i.e. Certificate/Diploma/Degree)		

### Section 3 - Post Secondary-Education

<b>Institution:</b>	<b>Student #:</b>
<b>Program:</b>	<b>Year:</b>  OF
<b>Certification Expected:</b>	<b>Expected date of Graduation:</b>
<b>Additional information:</b>	

**LRI USE ONLY** (date & initial)

Received	Verified & Entered	Entered in ARMS	Approved
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## Section 4 – Demographics (write N/A if not applicable to you)

<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Two-Spirit <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Male <input type="checkbox"/> Intersex <input type="checkbox"/> Other			<b>Date of Birth:</b> <small>M/D/Y</small>
<b>Preferred Language:</b> <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other	<b>Marital Status:</b> <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Divorced	<b>Employment Status</b> <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Student	<b># of Dependents:</b>
<b>Do you consider yourself to have a disability?</b> If yes please specify:			
<b>How did you find out about this bursary?</b>			

## Section 5 – Metis Verification (attach photocopies of proof as per instructions)

<b>Citizenship</b>	<b>OR</b>	<b>Genealogy</b>
<b>Organization:</b> (i.e. MMF)		<b>Organization:</b>
<b>Region:</b>		<b>Date:</b>
<b>Local:</b>		<b>Name on Genealogy:</b>
<b>Card #:</b>		<b>Name on Card:</b>

### Section 6 – Skills and Qualifications

<b>Are you a certified tradesperson?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>If yes, which trade?</b>
<b>Check all certificates that you obtain:</b> <input type="checkbox"/> 1st Aid / CPR <hr style="border-top: 1px dashed black;"/> <input type="checkbox"/> WHMIS <hr style="border-top: 1px dashed black;"/> <input type="checkbox"/> Dangerous Goods <hr style="border-top: 1px dashed black;"/> <input type="checkbox"/> Safe Food Handling <hr style="border-top: 1px dashed black;"/> <b>Other:</b> (please state)	<b>Expiry Date:</b>
<b>Do you have a valid drivers license?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Class:</b>
<b>Computer Skills:</b> <input type="checkbox"/> Word <input type="checkbox"/> Outlook <input type="checkbox"/> Excel <input type="checkbox"/> Powerpoint <input type="checkbox"/> Internet <input type="checkbox"/> Email	

### Section 7 – Employment History

	Most Recent Employer	2nd Recent Employer	3rd Recent Employer
<b>Company:</b>			
<b>Job Title:</b>			
<b>Type of Employment:</b>			
<b>Start Date:</b>			
<b>End Date:</b>			
<b>Reason Left:</b>			
<b>What types of careers interest you?</b>			
<b>What type of job would you like?</b>			
1st choice			
2nd choice			



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## Section 8 – Authorization

### CONSENT TO DISCLOSE PERSONAL INFORMATION

The information collected in this form is collected under the authority of the Indigenous Skills and Employment Training Strategy Metis Funding Agreement between Employment and Social Development Canada and the Manitoba Metis Federation and its affiliates (i.e. Louis Riel Institute) to assist you accordingly; it is required that all information is disclosed as requested.

In addition, the information provided on this form may be used to conduct program evaluations, research, statistical analysis and plan for future services. This will help determine the effectiveness of our programs and services and to fulfill our mandate and contractual obligation to Employment and Social Development Canada.

The Manitoba Metis Federation and its affiliates (i.e. Louis Riel Institute) can only collect, use and disclose personal information as permitted by the Freedom of Information and Protection of Privacy Act (FIPPA). FIPPA also gives the right for the individual in which the information was collected to see and obtain copies of records from the provided information with some limits.

The information collected on this form is used by the Louis Riel Institute to confirm your eligibility for the award and by the Manitoba Metis Federation to be added to their “Skills Database”.  
The intent of the data base is to gather information on Metis citizens that are unemployed, employed but looking for new opportunities, currently in training or post-secondary school and/or will require assistance at some point with securing full time employment.

I acknowledge that by providing my signature, I am granting the Manitoba Metis Federation and its affiliates the exclusive use of this information for the purposes of referral to training and referral to employment with prospective employers, and that all information submitted on this form is to be true and complete. I also understand that the personal information collected will be solely used to help me access employment services and benefits designed to help me prepare for, obtain and maintain employment.

I understand that the applications that are received may be used to identify training, be contacted for an employment opportunity or ask if I would like to participate in a local training program.

I hereby authorize the disclosure to the Manitoba Metis Federation and its affiliates any information provided above. I also relinquish all rights (legislated or otherwise) for the use of this information for purposes related to promoting and marketing my credentials as provided above. I hereby release and discharge the Manitoba Metis Federation and its affiliates from all and any claims and liabilities related to my training and job search

I authorize the Louis Riel Institute to confirm my Metis verification as necessary.

For the purpose of determining my eligibility for this award, I authorize the Louis Riel Institute and my institution, to exchange all necessary information.

Upon graduation, the Manitoba Metis Federation and its affiliates will be notified by my post secondary institution.

<b>First Name:</b> (print)	<b>Last Name:</b> (print)
<b>Signature:</b> (handwritten)	<b>Date:</b>