



# EMPLOYMENT OPPORTUNITY

## SUMMER STUDENTS 2019

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The Whitecap Dakota First Nation is 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: May 13, 2019 – August 30, 2019
- High School Students: June 24, 2019 – August 30, 2019

### APPLICATION GUIDELINES:

- **Students MUST be currently enrolled in school AND returning to school in the fall.**
- Must be at least 15 years of age.
- In order 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 final screening stage until all applicants submit this form.
- The successful candidate will be subject to a Criminal Record Check as a condition of employment.

### APPLICATION PROCESS:

- Submit application via email to: [employment@whitecapdakota.com](mailto:employment@whitecapdakota.com)  
Insert in the subject line: **Summer Student 2019**  
*You will receive an automatic reply acknowledging receipt of your application.*
- Alternatively, you may drop off your application in person or via mail or fax to:  
Whitecap Dakota First Nation                      Fax: (306) 374-5899  
Summer Student 2019  
182 Chief Whitecap Trail  
Whitecap SK S7K 2L2
- Application **must** include the following documents:
  - 1) Cover Letter and Resume
  - 2) Confirmation of current student enrollment (letter from the school)

For the Grade 12 and Post-Secondary students, must also include:

- 3) Confirmation of Fall 2019 student enrollment (acceptance letter from school)

**POST-SECONDARY APPLICATION DEADLINE:      Friday, May 10, 2019**

**HIGH SCHOOL APPLICATION DEADLINE:      Friday, June 14, 2019**



Saskatchewan Indian Training Assessment Group  
Local Labour Force Development

**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 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 Canada in assessing and evaluating the Aboriginal Skills and Employment Training Strategy (ASETS).

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. This information will be disclosed to the Federal 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 Canada.

Signature:..... Date: .....

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

Signature:..... Date: .....