

EI Funding Application

OFFICE USE ONLY

File No.

Received

BCR

Wage Subsidy

Job Creation Partnerships

Purchase of Training

Name of Employer/Band/Organization

Mailing Address

City/Town

Province

Postal Code

Telephone No.

Fax No.

Name and Position of Contact Person

Telephone No.

Email Address

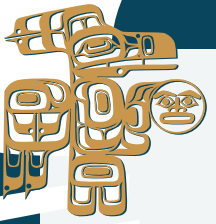
DESCRIPTION OF PROPOSAL

OBJECTIVE OF PROPOSAL:

DESCRIPTION OF ACTIVITIES:

NORTH VANCOUVER ISLAND
ABORIGINAL
TRAINING SOCIETY

NVIATS.COM



EI Funding Application

TARGETED CLIENTELE:

EXPECTED RESULTS:

LOCATION OF ACTIVITY:

NUMBER OF PARTICIPANTS:

PROJECT START:

DD/MM/YY

PROJECT END:

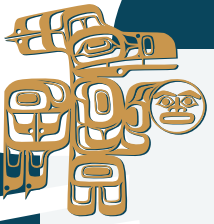
DD/MM/YY

NUMBER OF WEEKS:

PLEASE USE THIS AREA FOR ANY INFORMATION YOU WISH TO INCLUDE:

NORTH VANCOUVER ISLAND
ABORIGINAL
TRAINING SOCIETY

NVIATS.COM

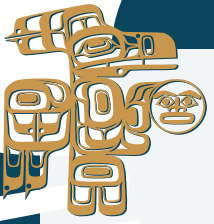


EI Funding Application Template

Financial Contributions

| Support to Individuals | | | | Requested From NVIATS | Sponsor Financial Contribution | Sponsor In-kind Contribution |
|------------------------|-----------------|----------------|-----------|-----------------------|--------------------------------|------------------------------|
| Position | Number of Weeks | Hours Per Week | Wage Rate | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | | | | | |

| Additional Support to Individuals | Requested From NVIATS | Sponsor Financial Contribution | Sponsor In-kind Contribution |
|------------------------------------|-----------------------|--------------------------------|------------------------------|
| Dependant Care | | | |
| Tuition/ Course Cost | | | |
| Other (please provide explanation) | | | |
| | | | |
| TOTALS | | | |



EI Funding Application Template

Financial Contributions

| Overhead Costs | Requested From NVIATS | Sponsor Financial Contribution | Sponsor In-kind Contribution |
|---|-----------------------|--------------------------------|------------------------------|
| Overhead Costs (Excluding Capital Costs) | | | |
| Capital Costs (Provide Explanation) | | | |
| Other Special Costs (Provide Explanation) | | | |
| TOTALS | | | |

TOTAL REQUESTED CONTRIBUTIONS

| NVIATS | Sponsor Financial | Sponsor In-Kind |
|--------|-------------------|-----------------|
| | | |

PLEASE PRINT

Full Name _____

Signature _____

Position _____

Date _____

PLEASE ATTACH BCR SUPPORT LETTER

NORTH VANCOUVER ISLAND
ABORIGINAL
TRAINING SOCIETY

NVIATS.COM