

**Introductory Carpentry Program (ICP)**

**PLEASE SUBMIT A COMPLETE APPLICATION TO ONE OF THE FOLLOWING OPTIONS:**

- **Fax to: (204) 940-1719**
- **Email to: [info@ildii.ca](mailto:info@ildii.ca)**
- **Mail to: Indigenous Leadership Development Institute  
#206 – 1075 Portage Avenue  
Winnipeg, MB R3G 0R8**

**For more information please contact ILDI @ (204) 940-1700 or [info@ildii.ca](mailto:info@ildii.ca)**

**PERSONAL INFORMATION:**

Name: \_\_\_\_\_  
First Middle Last

Mailing Address: \_\_\_\_\_  
No., Street, PO Box City Prov. Postal Code

Will you be living at the above address during the program? \_\_\_\_\_ Yes \_\_\_\_\_ No

If No, where do you plan to live? \_\_\_\_\_

Telephone: Home (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

If you don't have a phone number, where can we leave a message for you: (\_\_\_\_\_) \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Native Ancestry: \_\_\_\_\_ Status \_\_\_\_\_ Non-Status \_\_\_\_\_ Métis \_\_\_\_\_ Inuit

Name of Home Community/First Nation: \_\_\_\_\_

**PREVIOUS EDUCATION:**

**\*If you have transcripts available when applying, please include them with application.**

What was your last FULL grade completed (*for example, Grade 11*): \_\_\_\_\_

What year was it? \_\_\_\_\_ Name, City, Province of the School: \_\_\_\_\_

To the best of my knowledge, I certify that the information contained in this application is true and correct. I realize that any false statement contained in this application may result in my disqualification for or from this program.

I hereby authorize the disclosure to the Indigenous Leadership Development Institute, Inc. of any information from any educational institution, and/or employer for the purpose of verifying and/or investigating any information pertaining to any aspect of this application form.

Date: \_\_\_\_\_ Name (print) \_\_\_\_\_

Signature \_\_\_\_\_