

NIPISSING UNIVERSITY

INSTRUCTIONS FOR APPLICATION TO INDIGENOUS TRANSITION PROGRAMS August 2022



- Indigenous Foundation Program
- Summer Indigenous Institute

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY

The Admissions Committee considers more than just your grades when assessing your application to the Indigenous Foundation program (IFP) and the Summer Indigenous Institute program (SII). If you have any questions, please contact the Student Success and Development Coordinator, Indigenous Student Transitions at (705) 474-3450 Ext. 4441.

APPLICATION FORM:

Attached to this document, you will find the Application form. Please type or print clearly in pen. Complete ALL sections of the application form. Illegible or incomplete forms may not be processed. Please contact us if you need assistance or have questions completing this application.

APPLICATION FEE:

There is a \$50.00 non-refundable application processing fee due at time of application. There are multiple ways to pay this application fee: (Please note that credit card payments are not accepted).

- Cheque* – Available if sending application by mail. Attach cheque to application.
- Money Order* – Available only if sending application by mail. Attach Money Order to application.
- Pay at the Finance Office at Nipissing University**
- Online Banking**

*Cheques or money orders must be made payable to "Nipissing University".

**If paying directly at the Finance Office or through Online banking, please note that a student number is required first. Therefore, please submit your application documents to

admissions@nipissingu.ca first, and indicate how you would like to pay, so that a student account may be created first and receive a student number. The applicant will be notified by email of the next steps to take to make the \$50.00 application payment so that the application can then be processed.

ADMISSION REQUIREMENTS: (For the Indigenous Foundations Program and Summer Indigenous Institute)

- Must be of Indigenous ancestry;
- Are a Canadian Citizen or a Permanent Resident;
- Applicants may also be required to participate in an interview.

SUPPLEMENTAL DOCUMENTS:

Applicants are also required to submit the following supplemental documents:

- a) Two reference forms from two different referees – Referees must fill out the Reference Form located after the application form.
 - i. One personal reference
 - ii. One professional reference completed by a teacher, guidance counselor, employer or community member is required.

Please note that referees may not be a family member.

- b) A two-page statement (typed and double spaced)
 - Describe your academic history, strengths and challenges (academic or personal), reasons why your academic history may not reflect your full potential, and how you plan to be successful at university.
 - Describe your academic goals and why you wish to attend the Indigenous Foundations Program.
 - Describe how the program will help you achieve your goals and what your level of interest is in various aspects of Indigenous culture as part of the program.
- c) For IFP applicants only – An updated resume outlining educational, work and volunteer experience.
- d) For SII applicants only – A copy of the Offer of Admission form from Algoma University, Lakehead University, Laurentian University, or Nipissing University.
- e) For IFP applicants only – All official transcripts; secondary and post-secondary. Please follow the instructions below on how to submit your official transcripts. SII applicants are not required to submit transcripts.

OFFICIAL TRANSCRIPTS

- i. We require official transcripts from EVERY institution attended to make admission decisions, whether they are considered relevant, you graduated from the program,

your courses are still in progress, or you were successful or not. This includes Official transcripts from your last High School attended and non-Canadian institutions. It is the applicant's responsibility to contact the institutions directly. The transcripts can be mailed, faxed, or emailed directly from the institution to Nipissing University and will only be accepted when we can verify that they come directly to us from the issuing institutions. The transcripts may not come directly by the applicant. A report card does not constitute of a transcript. Photocopies of transcripts are not considered official. All official transcripts must be received before admission decisions will be made.

- ii. International college and university transcripts must be assessed first (course-by-course analysis) by the World Education Service – www.wes.org/ca.
- iii. A proof of name change is only required if academic documents show a name other than the name listed on the application is made (ie: Marriage certificate or license, legal Name Change certificate, divorce decree, etc.). A copy or picture of the document can be emailed, faxed, or mailed by the applicant with the application.
- iv. If the documents you are submitting are not in English, you will be required to provide notarized English translations together with copies of the original transcripts.
- v. Nipissing University transcripts need not be submitted, however, if you attended Nipissing University prior to 1992 you are considered a Laurentian University student and you must submit that transcript

DEADLINES

To allow sufficient time to process the application, we recommend you submit your application, payment and required documents no later than July 1st, 2022. Please note that applications may take 3-4 weeks to process before receiving a decision. Please leave enough processing time for your funding deadline (if applicable). Final decisions will be sent by email.

DIRECT ALL DOCUMENTS TO:

Nipissing University - The Office of the Registrar,
Box 5002, 100 College Drive
North Bay ON P1B 8L7
E-mail: admissions@nipissingu.ca
Fax: 705-495-1772
Website: www.nipissingu.ca/indigenous

Note: Neither this application nor supplementary acknowledgement material constitutes an offer of admission. Successful candidates will receive admission letters clearly outlining the program of admission and other pertinent details. Applicants are also advised that supporting material cannot be returned.

Protection of Privacy

Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs". Additionally, personal information may be used by university staff in many offices on a "need to know" basis to identify and contact students who require their services. Personal information is also provided to the Nipissing University Student Union to enroll students in their Health Care Plan.

APPLICATION FOR ADMISSION
A non-refundable application fee of \$50.00 must accompany this application form in order for your application to be processed.

SURNAME		GIVEN NAME(S)		FORMER SURNAME	
MAILING ADDRESS					OEN NUMBER (if known)
CITY		PROVINCE	POSTAL CODE	E-MAIL	
TELEPHONE - Home		TELEPHONE - Cell		DO YOU IDENTIFY AS AN INDIGENOUS PERSON? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> FIRST NATION <input type="checkbox"/> METIS <input type="checkbox"/> INUIT <input type="checkbox"/> OTHER	
SOCIAL INSURANCE NUMBER (Optional)		BIRTH DATE		MARITAL STATUS	
- -		MONTH	DAY	YEAR	<input type="checkbox"/> SINGLE, DIVORCED, WIDOWED <input type="checkbox"/> MARRIED, SEPARATED
STATUS IN CANADA		COUNTRY OF CITIZENSHIP		IF NOT BORN IN CANADA, ARRIVAL	FIRST LANGUAGE
<input type="checkbox"/> CANADIAN CITIZEN <input type="checkbox"/> PERMANENT RESIDENT <input type="checkbox"/> STUDENT VISA <input type="checkbox"/> OTHER VISA (SPECIFY)				MONTH	YEAR
					<input type="checkbox"/> ENGLISH <input type="checkbox"/> FRENCH <input type="checkbox"/> OTHER

AREA OF INTEREST

PROGRAM OF ENROLMENT:	<input type="checkbox"/> Summer Indigenous Institute <input type="checkbox"/> Indigenous Foundation Program	FOR SUMMER INDIGENOUS INSTITUTE APPLICANTS ONLY: Please indicate where you accepted an Offer of Admission from and to which program: <input type="checkbox"/> Algoma University <input type="checkbox"/> Lakehead University <input type="checkbox"/> Laurentian University <input type="checkbox"/> Nipissing University Program: _____
WILL YOU BE RECEIVING FUNDING?	If yes: <input type="checkbox"/> OSAP or <input type="checkbox"/> Band funding	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
BAND FUNDING DEADLINE DATE (if applicable):		

LAST SECONDARY SCHOOL ATTENDED

FROM	TO	NAME OF SCHOOL	GRADE COMPLETED	DIPLOMA ACHIEVED?
				<input type="checkbox"/> Yes <input type="checkbox"/> No

ALL POST-SECONDARY INSTITUTION(S) ATTENDED (Include all colleges and universities attended, even if not considered relevant)

FROM	TO	INSTITUTION	PROGRAM	DIPLOMA/DEGREE AWARDED?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
FROM	TO			<input type="checkbox"/> Yes <input type="checkbox"/> No
FROM	TO			<input type="checkbox"/> Yes <input type="checkbox"/> No

IF YOU HAVE PREVIOUSLY ENROLLED AT NIPISSING UNIVERSITY, PLEASE COMPLETE THIS SECTION

NIPISSING STUDENT NUMBER:	LAST PROGRAM ENROLLED IN:	LAST DATE ATTENDED: (mm/yyyy)

It is your responsibility to ensure that your application and all supporting documentation is truthful, complete, and correct. Nipissing University reserves the right to verify any information provided as part of this application. If any information in your application is determined to be false or misleading, concealed or withheld, your application may be invalidated, and this could result in its immediate rejection or in the revocation of an offer of admission or registration at the university. Information about a rejection or revocation of your application may be shared with universities and colleges across Canada. The determination of whether an application contains false or misleading information or that you have concealed or withheld information, and with which universities and colleges this information may be shared, is solely at the discretion of the university.

I hereby certify that all personal information and documents submitted are true, correct, and complete including my declaration of citizenship and status in Canada.

APPLICANT'S SIGNATURE _____ DATE _____

- Checklist:**
- | | |
|--|--|
| <input type="checkbox"/> Completed Application Form | <input type="checkbox"/> Resume (IFP applicants only) |
| <input type="checkbox"/> Two Page Statement | <input type="checkbox"/> All Official Transcripts (IFP Applicants only) |
| <input type="checkbox"/> Two Reference forms (1 Personal and 1 Professional) | <input type="checkbox"/> Proof of Name Change (if required) |
| <input type="checkbox"/> Copy of Proof of Indigenous Ancestry | <input type="checkbox"/> Copy of Offer of Admission form (SII Applicants only) |
| <input type="checkbox"/> \$50.00 Application Processing Fee | |

FOR OFFICE USE ONLY

Finance: Amount Paid: _____ Date Paid: _____ Receipt No.: _____ Initials: _____

REFERENCE FORM

One personal reference and one professional reference completed by a teacher, guidance counselor, employer or community member is required. Please note that referees may not be a family member.

APPLICANT'S NAME			REFEREE NAME		
PROFESSIONAL REFEREE * <input type="checkbox"/> Yes	RELATIONSHIP TO APPLICANT			HOW LONG HAVE YOU KNOWN APPLICANT	
PERSONAL REFEREE <input type="checkbox"/> Yes					
REFEREE MAILING ADDRESS				PHONE NUMBER	
CITY	PROVINCE	POSTAL CODE	E-MAIL		
REFEREE SIGNATURE			DATE		

PLEASE RATE THE APPLICANT IN THE FOLLOWING AREAS; 5 =VERY STRONG, 3=AVERAGE , 1= NEEDS DEVELOPMENT

1. Communication skills, written	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
2. Communication skills, oral	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
3. Ability to support others	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
4. Ability to manage time effectively	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
5. Ability to deal with conflict/problem solve	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
6. Initiative to complete tasks	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
7. Ability to be resourceful/self-directed	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
8. Willingness to receive feedback	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
9. Interpersonal skills	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
10. Overall assessment	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1

PLEASE PROVIDE AN ASSESSMENT OF THE APPLICANT'S PERSONAL QUALIFICATIONS AND SUITABILITY FOR UNIVERSITY STUDY.

a) Please describe the applicant's communication skills (written and/or oral).

b) Please discuss the applicant's willingness to take initiative.

c) Please provide examples of the applicant's interpersonal skills, ability to work in a team environment and support others.

d) Please outline the applicant's planning and organizational skills and any other strengths or challenges.

e) Please provide any additional information. *(Optional)*

Reference form may be returned to the applicant to include with their application package or you may submit the form directly to the following:

Nipissing University - The Office of the Registrar,
Box 5002, 100 College Drive,
North Bay ON P1B 8L7
E-mail: admissions@nipissingu.ca
Fax: 705-495-1772

*If document is emailed, please note that for the Professional Referee, the email must come from a professional email address.

**Inquiries regarding the reference form can be forwarded to the Office of Indigenous Initiatives by email to indigenousprograms@nipissingu.ca or by phone at 705-474-3450 ext.4441.

Protection of Privacy

Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs". Additionally, personal information may be used by University staff in many offices on a "need to know" basis to identify and contact students who require their services. Personal information is also provided to the Nipissing University Student Union in order to enroll students in their Health Care Plan

REFERENCE FORM

One personal reference and one professional reference completed by a teacher, guidance counselor, employer or community member is required. Please note that referees may not be a family member.

APPLICANT'S NAME		REFeree NAME		
PROFESSIONAL REFEREE * <input type="checkbox"/> Yes	RELATIONSHIP TO APPLICANT		HOW LONG HAVE YOU KNOWN APPLICANT	
PERSONAL REFEREE <input type="checkbox"/> Yes				
REFeree MAILING ADDRESS			PHONE NUMBER	
CITY	PROVINCE	POSTAL CODE	E-MAIL	
REFeree SIGNATURE			DATE	

PLEASE RATE THE APPLICANT IN THE FOLLOWING AREAS; 5 =VERY STRONG, 3=AVERAGE , 1= NEEDS DEVELOPMENT

1. Communication skills, written	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
2. Communication skills, oral	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
3. Ability to support others	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
4. Ability to manage time effectively	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
5. Ability to deal with conflict/problem solve	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
6. Initiative to complete tasks	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
7. Ability to be resourceful/self-directed	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
8. Willingness to receive feedback	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
9. Interpersonal skills	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
10. Overall assessment	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1

PLEASE PROVIDE AN ASSESSMENT OF THE APPLICANT'S PERSONAL QUALIFICATIONS AND SUITABILITY FOR UNIVERSITY STUDY.

a) Please describe the applicant's communication skills (written and/or oral).

b) Please discuss the applicant's willingness to take initiative.

c) Please provide examples of the applicant's interpersonal skills, ability to work in a team environment and support others.

d) Please outline the applicant's planning and organizational skills and any other strengths or challenges.

e) Please provide any additional information. *(Optional)*

Reference form may be returned to the applicant to include with their application package or you may submit the form directly to the following:

Nipissing University - The Office of the Registrar,
Box 5002, 100 College Drive,
North Bay ON P1B 8L7
E-mail: admissions@nipissingu.ca
Fax: 705-495-1772

*If document is emailed, please note that for the Professional Referee, the email must come from a professional email address.

**Inquiries regarding the reference form can be forwarded to the Office of Indigenous Initiatives by email to indigenousprograms@nipissingu.ca or by phone at 705-474-3450 ext.4441.

Protection of Privacy

Information requested from students and applicants is collected under the authority of the Nipissing University Act, 1992. Pursuant to the Freedom of Information and Protection of Privacy Act you are hereby notified that: "By applying for admission to Nipissing University and by registering in programs or courses at the University, you are accepting the University's right to collect pertinent personal information. The information is needed to assess qualifications for entry, establish a record of performance in programs and courses, provide the basis for awards and government funding, and to assist the University in the academic and financial administration of its affairs". Additionally, personal information may be used by University staff in many offices on a "need to know" basis to identify and contact students who require their services. Personal information is also provided to the Nipissing University Student Union in order to enroll students in their Health Care Plan