





John Hickes Business Scholarship Package

Atuqtuarvik Corporation

Established July 2018

The John Hickes Business Scholarship offered was created in 2018 to honour John Hickes for his leadership as an original and long-serving board member of Atuqtuarvik Corporation. This scholarship also recognizes John's life-long commitment and involvement in business as a business owner, and his many contributions in helping to establish a stable and progressive economy in Nunavut. To commemorate John's positive impact and influence, we are pleased to offer this scholarship to students who are pursuing a post-secondary education in the field of business.

SCHOLARSHIP

The Atuqtuarvik Corporation John Hickes Business Scholarship selection committee will award one (1) \$5,000 scholarship to a student in the business stream at a post-secondary education institution each year.

ELIGIBILITY CRITERIA

- 1. The applicant must be an Inuk under the Nunavut Agreement.
- 2. The applicant must be enrolled in a post-secondary institution in the field of business or in a program relating to the advancement of Inuit.
- 3. An applicant can be awarded the scholarship only one time.
- 4. A completed application form must be received by the deadline date.

APPLICATON CHECKLIST

- 1. Completed application form.
- 2. A 500-word essay explaining why you are pursuing your current choice of studies and what career path you hope to pursue following the completion of your studies.
- Proof of enrollment in full-time studies.

SUBMITTING YOUR APPLICATION

Please send your application by e-mail, mail or fax to:

Atuqtuarvik Corporation Scholarship Committee 102-61 Tupirvik Avenue P.O Box 900 Rankin Inlet, NU X0C 0G0

Toll Free: 1-888-645-5901

Tel: 867-645-5900

Email: contact@atuqtuarvik.com

The deadline for scholarship applications is July 30, 2021 at 5:00 PM CST.



PERSONAL INFORMATION	ON:							
Full Name:								
Permanent Address:								
Temporary Address (Sc	chool):							
Which address should v	we use to	contact y	ou?					
☐ Permanent address of	or 🗆 Tem	porary (s	chool) a	ddress				
Telephone:			Cell I	Cell Phone:				
E-mail:								
Date of Birth:								
EDUCATION: SCHOOL	Di	DOCDAM.		CTART R	ATE AND	CERT	TELCATE!	
SCHOOL	PI	PROGRAM		START DATE AN LENGTH OF PROGRAM		CERTIFICATE/ DIPLOMA/DEGREE		
FINANCIAL NEED								
Marital Statu	ı s: ☐ Si	ngle 🗆	Married	☐ Comm	non-law	☐ Separated	/Divorced	
Number of Dependent	ts:							
		Student Funding (ex: FANS)				/month		
		Employment Income:				/month		
Sources of Incom	ne:	Income from Savings:			/semester			
		Other Scholarships:				/semester		
		Other	Sources	of Income:				
			Tui	tion & Fees			/semester	
			Books	& Supplies:			/semester	
Annual Expens	es	Rent:				/month		
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Daycare (If applicable):

Other Expenses:



/month

APPLICANT STATEMENT:

Signature of Applicant

I hereby certify that the information contained in this application is true and correct to the best of my knowledge.

I understand that the information contained in this application will be made available to the selection committee and may be used by Atuqtuarvik Corporation for the purpose of compiling and publishing statistics. Information that personally identifies me will not be released.

I understand that if I am chosen as a scholarship recipient, my photo may be taken and used i
association with promoting the scholarship program.



Date