CIMS/ Aamjiwnaang Indian Band 2024 Bursary Award Application

At CIMS, are proud to work and live in the territory of the Aamjiwnaang. We are guided by our company values of Empowerment, Opportunity, and Integrity and we seek to listen, get to know and understand the Indigenous Peoples to discover ways we can work and grow together.

Our relationships with Indigenous employees and communities will not only spur mutually beneficial economic growth but also nurture profound understanding, extending across every corner of the regions we serve. We hold this commitment close to our hearts, embracing it as a cornerstone of our mission.

CIMS is sponsoring one (1) \$1,000 bursary for the 2024-2025 school year to an Aamjiwnaang band member entering a full-time trades program.

Application Deadline: Aug 23, 2024





1. Checklist

	Completed and signed application form
	A copy of Status Card
	Current Resume
	Personal 500 word essay on family background, reason why you are going into trades as a career and future employment goals
	Transcript of last schooling attended ie high school, college
	Proof of Registration/Enrollment — from the post-secondary institution you will attend (i.e., Acceptance letter)
	2 Community non-relative written references – speaking to character, commitment to past schooling or employment
2. E	Eligibility
	Status member Aamjiwnaang Indian Band Accepted to an approved trades program at an accredited post-secondary institution or

3. Application Submission

Send your application package to:

a) Email your application package to:

trades school on a full-time basis.

Attn: Shelly Bidlock

Email: sbidlock@cimsltd.com

Or Attn: Melissa Medeiros

Email: mmedeiros@aamjiwnaang.ca

Telephone: 519-336-8410

b) Address to mail or drop application:

978 Tashmoo Avenue Sarnia, ON N7T 7H5

4. Selection of Winners

Winners will be notified in writing by Aug 30, 2024. A cheque will be presented with pictures taken for CIMS and Aamjiwnaang.





Applicant Information

Name	Date:	
Last	First	
Address		
City	Province	Postal Code
Phone:	Email:	
SIN#	Date of Birth:	
Status Number #:		
	Education	
High School:		
City of High School:	Did you Gradua	ate?: YesNo
Attended From:	To:	
Post Secondary Institution Attende	ed:	
Program:	Did you gradua	te?: YesNo
Attended From:	To:	
	Declaration	
tify that all the information include viving a bursary, I give permission to rmation publicly.		
Signature		_Date: