



Witsuwit'en Mentor-Apprentice Immersion Opportunity April 29 to June 6, 2019

Funded by First Peoples Cultural Council

APPLICATION FORM

First Name: _____ Last Name: _____

Telephone Number: _____ Email: _____

Age: _____ Clan: _____

This application process will require the Mentor and Apprentice to create a work plan and commit to no less than 12 hours per week scheduled at your convenience. After 6 weeks, the Mentor and Apprentice will present the outcome of their learning and collaboration to the WLCS.

It is the responsibility of the participants to collaborate and initiate their own team and personalized work plan and schedule. A schedule and work plan template will be attached to this application.

PERSONAL INFORMATION

Have you attended Residential school?

Yes No

Do you have immediate family members who attended Residential School?

Yes No

Do you have a family or know a fluent speaker who can support you in your learning outside of the program?

Yes No

Are you interested in passing on the knowledge you gain from this experience

Yes No

On a scale from 1-10, how would you rate your personal fluency/understanding of the Witsuwit'en Language? (1 being the lowest – 10 the highest)

1 2 3 4 5 6 7 8 9 10



FIRST PEOPLES'
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Name of Mentor: _____

Name of Apprentice: _____

Please read the following key statements regarding the Mentor Apprentice Program and initial where appropriate.

A. We understand that participation in the Mentor Apprentice Program involves making a commitment to spend at least 12 immersion hours per week working towards the Apprentice gaining fluency in Witsuwit'en.

Please initial: Mentor _____ **Apprentice:** _____

B. We understand that the Mentor Apprentice program revolves around the concept of being immersed in our First Nations language for significant portions of time during the learning period. We understand that it is highly recommended that we spend at least 12 hours per week on this project.

Please initial: Mentor _____ **Apprentice:** _____

C. We understand that the training session is a required part of the program and we intend to participate in the training session provided for us.

Please initial: Mentor _____ **Apprentice:** _____

D. As the Apprentice in this program, I understand that I will be responsible for maintaining regular contact with the WLCS language programs coordinator during our learning period and I will be responsible for submitting reports on the progress of my language learning.

Please initial: Apprentice: _____

E. We understand that the Mentor and Apprentice will meet with the WLCS and board of directors at the end of the program to present their learning and collaboration.

Please initial: Mentor _____ **Apprentice:** _____

Mentor Signature: _____ Date: _____

Apprentice Signature: _____ Date: _____