



**Witsuwit'en Mentor-Apprentice
Immersion Opportunity
September 2020 to March 31, 2021**
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 15 hours per week scheduled at your convenience. Every 6 weeks, the Mentor and Apprentice will present the outcome of their learning and collaboration to the WLCS via video conferencing (3 meetings).

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

PERSONAL INFORMATION

1. Have you attended Residential school?

Yes No

2. Do you have immediate family members who attended Residential School?

Yes No

3. Is the fluent speaker who you have chosen for the MAP program a relative?

Yes No

4. What is your relationship with the fluent speaker?

5. Do you live together?

Yes No

6. How will you ensure the safety of the fluent speaker you are learning with considering COVID-19? Please provide details.

7. Do you have access to the Internet?

Yes No

8. Will you need to borrow a tablet or laptop computer from the WLCS to submit reports and have video conference meetings with the Program Coordinator?

Yes No

9. Will you need training on how to use this technology or programs such as Skype or Zoom?

Yes No

Please provide details:

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

Yes No

11. 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)

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 **15 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 15 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 Program Coordinator during our learning period and I will be responsible for submitting timesheets and reports on the progress of my language learning.

Please initial: Apprentice: _____

E. We understand that the Mentor and Apprentice will meet with the WLCS Program Coordination via video conferencing and possibly the board of directors at the end of the program to present our learning and collaboration.

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

Mentor Signature: _____ Date: _____

Apprentice Signature: _____ Date: _____



WLCS MAP Program – Mentor Consent Form

I, _____, am aware that my apprentice has to have a
(print name)
COVID-19 plan to participate in this program. My apprentice has openly shared that plan and I fully understand the steps that he/she take to keep me safe. I agree with the plan and consent to participating in the program.

Note: Participants who do not feel safe due COVID-19 risks can retract their consent at any time.

Mentor Signature

Telephone number: _____

