

COVID-19 Relief Support Application

These programs are for registered Métis Nation–Saskatchewan (MN–S) citizens and those with applications in process. If you don't have an MN–S citizenship number or any documents that show you have submitted your citizenship application, you can start your <u>citizenship application here</u>.

Please Note: any funding received from MN–S may be considered taxable income by Canada Revenue Agency and could affect any future benefits payments and/or your 2020 income taxes.

The following information is being collected for the purposes of determining your eligibility for and administering your access to COVID-19 programming.

Are you a registered Métis citizen/have submitted your registry application?

l am a registered Métis citizen		Citizenship number	Citizenship number			
l have s	ubmitted my application	Date of application				
			1 1			
First Name	Initial	Surname	Birthday Month Year			
Gender:	○ Male ○ Female ○ No	on-binary O Other O Pref	er not to say			
Marital Status:	○ Single ○ Married ○	Common Law O Separated	\bigcirc Divorced \bigcirc Widowed \bigcirc Other			
Primary Phone		Mobile Phone	 :			
Email Address		Number of pe	ople in your household			
Number of people you support outside of your household		ehold Number of ch	ildren under the age of 18			
		Saskatche	wan			
Street Address	Ci	ity Province	Postal Code			

Mailing address if different than above (R.R. #, Box#, etc.)



Please complete the following sections for the programs you are applying for.

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A. Support for Post-Secondary Students

The COVID-19 pandemic has altered the lives of post-secondary students. As a result, most students are having to take their classes online while managing family life. In addition, the COVID-19 pandemic has increased mental and financial stress, therefore MN–S is offering the following supports to help Métis students during this challenging time:

Technology	This is to help you attain basic technology for your online learning from home. The approved technology may include a laptop, printer, iPad, internet booster etc. or any means of technology that will help with your studies.
Rent	Having a roof over our heads is one of the basic necessities. This subsidy will help you and your family maintain a home while you are continuing your post-secondary studies.
Utilities	Maintaining utility bills is something many post-secondary students struggle with regularly, and even more so during the pandemic. Utility subsidies will help to alleviate stress related to paying your utility bills; allowing you more time to focus on your family and your studies versus managing finances.

Post-Secondary institute/University	r/College	
Are you a Full Time or Part Time Stu	dent	Student Number
Type of Support Needed	O Technology	Please Specify:
	O Rent	Lease agreement (please include your lease agreement with this application)
	Rent amount	Landlord
	Primary Phon	e Email
	○ Utility	Please include your last two months of utility bills with this application



B. Housing Assistance and Self-Isolation Supports

MN–S recognizes that many people are being stretched financially and emotionally by COVID-19. MN–S Housing Assistance may be available to those facing eviction and arrears. Self-Isolation Assistance may also be available. This Program has been put in place to help those struggling to make ends meet and the funds are intended for those most in need. Payment will be made to the landlord or mortgage provider, not directly to the Métis citizen.

Housing situation:	○ Renter	⊖ Ho	omeowner	○ Supported	living	\bigcirc Living with family/frier	nds O Other
Household income prior to COVID-19			Current household income				
Have you experienced any em	oloyment adjı	ustmer	nts due to CC	DVID-19? O Y	es O	No	
Is your mortgage or rent in arre	ears? C) Yes	 Please include an arrears statement with this application form. Proof of arrears must be provided with either a current mortgage/rental statement or an eviction notice. 				
	C) No	·				
Are you a Post-secondary stud	ent? C) Yes	O No				
Landlord Name			Primary Phc	one		Email	
Are you or is any one in your household considered high ris	k?: O Elde	erly	O Immune	e compromised	O Pre	e-existing health conditions	O Other
Are you or is any one I your ho	usehold consi	dered	high risk?	⊖ Yes ⊖ No)		

Do you feel additional wellness support is needed to help you achieve quarantine success? If so, please specify

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C. Emergency Childcare Supports

Application criteria for emergency childcare assistance includes the following:

- Funding of \$500 per child to a maximum of \$2500 per family.
- Only one custodial parent/guardian need apply. If a child is living in a joint custody arrangement each parent will receive \$250 per child.
- Children must be 10 years old or younger. (Born January 1, 2010 or after).
- Children must be registered Métis citizens with Métis Nation–Saskatchewan or have a registration in progress. The parent/guardian and children applying must have been residents of Saskatchewan for the past six consecutive months.
- An application must be completed, with all supporting document information provided.

• Information for the Métis child or children:

			/ /
Child's Legal Name		SK Métis Citizenship Number	Birthday Month Year
			/ /
Child's Legal Name		SK Métis Citizenship Number	Birthday Month Year
			/ /
Child's Legal Name		SK Métis Citizenship Number	Birthday Month Year
			/ /
Child's Legal Name		SK Métis Citizenship Number	Birthday Month Year
			/ /
Child's Legal Name		SK Métis Citizenship Number	Birthday Month Year
Applicant relationship to child:	\bigcirc Custodial Parent / Guardian	\bigcirc Unique Relationship (temporary caregiver)	O Non-Custodial Relationship

Would you like to include any other information?



Declaration of Accuracy of Information Provided

I do hereby confirm that all the above information provided is correct to my knowledge. This declaration is made voluntarily and in good faith and is intended solely for the purpose of confirming my eligibility for access to MN–S COVID 19 support programming and for the purpose of administering my access to the programming.

Consent to Collection and Disclosure of Personal Information

By submitting this application or by participating in the Métis Nation–Saskatchewan (MN–S) COVID-19 emergency services and programs, I understand and agree that the MN–S, in the fulfillment of its reporting requirements, may disclose the information provided in support of my access to the program, including inter alia information provided to establish Métis status and/or eligibility to participate in the MN–S COVID-19 emergency services and programs. I accept this as a condition of applying for and/or receiving support and I consent to such disclosure.

I further understand and acknowledge that the information I provide may be used to assess programming needs. I make this solemn affirmation conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

I Agree

Sign here / type your name

For more information call 1-833-343-8285

Email this completed form and all of the required supporting documentation to COVID19@mns.work