



**Tr’ondëk Hwëch’in Citizens Benefit Fund  
Application for Funding**

**APPLICATION INSTRUCTIONS:** (please fill in all parts of application A-D)

**PART A - APPLICANT INFORMATION**

Name of Applicant:	
Mailing Address, Street, City, Territory, Postal Code:	
Phone:	Phone alternate:
Email:	
Must check one and provide proof: <input type="checkbox"/> Tr’ondëk Hwëch’in Citizen <input type="checkbox"/> TH Organization	Age: Under 18 <input type="checkbox"/> 18-30 <input type="checkbox"/> 31-54 <input type="checkbox"/> 55+ <input type="checkbox"/>
How did you hear about this fund? (OPTIONAL)	

**PART B - INFORMATION**

Purpose of Funding: (check 1 of the 5 Key Pillars)

**Education & Training:** for education or training opportunities that build capacity in our community. (Limit \$3,000)

**Health & Wellness:** for activities that promote a happier and healthier way of living. This includes physical, mental and spiritual health. (Limit \$250 for reimbursement of supplies, tools or equipment; or \$1,000 for reimbursement of program development fees)

**Arts & Culture:** for events or activities that are rooted in Tr’ondëk Hwëch’in culture. (Limit \$250 for reimbursement of supplies, tools or equipment; or \$1,000 for reimbursement of program development fees)

**Youth Engagement:** for activities that encourage community engagement and development of Citizens aged 15-24. (Limit \$250 for reimbursement of supplies, tools or equipment; or \$1,000 for reimbursement of program development fees)

**Elder’s Support:** financial support for citizens aged 55 or older. (Limit \$250)

Funds are available to all TH Citizens, in and out of the community, on organizations that support or are run by TH citizens. Priority allocation will be given to Citizens who have not yet accessed the Fund and or pursuing education or training. **Citizens should expect to only access the fund once.**

The TH CBF will not provide reimbursement or fund fuel expenses or the purchases of motorized vehicles/recreational vehicles.

For parents submitting on behalf of their children, please be aware that it could impact their eligibility on future applications. TH Citizens aged 15+ are expected to submit their own application.

Applications are assessed on financial need and the community impact they make. The assessment is made by the Citizen Benefit Fund's Committee made up of TH Citizens', Chief Isaac staff and Chief Isaac's partner's representatives. Disbursements are made on a quarterly basis and application assessments will happen in the last month of each quarter.

If you require assistance in completing this form, please let us know and we will do all we can to accommodate.

If additional room is required, please attach additional pages to your application.

**ANSWER THE FOLLOWING QUESTIONS:**

1. How much are you requesting from the Citizens Benefit Fund?

2. What is your rational/reasoning for requesting these funds?

3. Which of the 5 pillars above does your application fall under? Please explain.

4. Is there any other information you want us to know when we evaluate your application?

**PART C - AFFIRMATION**

**I AFFIRM THAT** the information in this application is accurate and complete. I understand that the information provided in this application may be accessible under the Access to Information Act.

**AUTHORIZED SIGNATURE**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Date

**PART D - CHECK LIST OF REQUIRED ITEMS**

(Before you submit your application, make sure you have enclosed all the proper documents):

**Documents for Application:**

- Completed Application Form PART A, B & C

Call Chief Isaac office at 867-993-5384, or email [citizenfund@chiefisaac.ca](mailto:citizenfund@chiefisaac.ca) for help with the application.

- Proof of Tr'ondëk Hwëch'in citizenship/TH organization benefitting citizens

- Or-

- I, \_\_\_\_\_, do grant The Chief Isaac Benefit Fund to verify my Tr'ondëk Hwëch'in Citizenship with the TH Registrar's office. I have agreed to have my full name, mailing address, citizenship number, date of birth and birthplace to be released.

Citizen Name \_\_\_\_\_

Citizen Signature \_\_\_\_\_

**Documents for Final Reporting (after approval of funding):**

- Proof of payment
- Proof of completion/accurate use of funds
- Photo of Applicant

Please submit this form along with other application documents to:

Tr'ondëk Hwëch'in Citizen Benefit Fund  
Box 1110, Dawson City, Yukon, Y0B 1G0

or

Email: [citizenfund@chiefisaac.ca](mailto:citizenfund@chiefisaac.ca)