



COVID-19 ASSISTANCE

Application Form

Native Council of Prince Edward Island

DISCLAIMER

Disclaimer: The COVID-19 Assistance Fund is a program created to assist off-reserve Indigenous peoples on PEI who have been negatively impacted by COVID-19 and are in need of support. This program aims to aid individuals with essential needs. Provided this information, I declare that I am an individual of Aboriginal/Indigenous Ancestry facing additional burdens due to COVID-19.

Signature: _____

Date: _____

APPLICANT INFORMATION

Name:	Date of Birth:
Home Address:	Email:
Phone Number:	Number of people in your household:
Are you a person of Aboriginal/Indigenous ancestry?	

EMPLOYMENT INFORMATION OF APPLICANT

Employers Name:	Address:
Phone Number:	Employment Status:
Hours per week before COVID-19:	Hours per week currently:
Estimated Income Loss:	Employment Outlook:

HOUSEHOLD INFORMATION

Name	Age	Relationship	List all current income



ONGOING ASSISTANCE

Are you currently receiving COVID-19 Assistance? If yes, what type of assistance/where from?

REQUESTED ASSISTANCE

What needs do you have that require assistance?

OTHER INFORMATION

List any other info you would like to disclose during the application process:

To submit this application online or if you have any questions,
please email: Ryan Knockwood, Emergency Response Coordinator
covid@ncpei.com // (902) 629-1541// Office: (902)892-5314





COVID-19 Assistance Application Form

Native Council of Prince Edward Island



Disclaimer: The COVID-19 Assistance Fund was created to assist off-reserve Indigenous peoples on PEI who have been negatively impacted by COVID-19 and require immediate support. This program aims to aid individuals with essential needs including - but not limited to - housing, groceries, transportation, spiritual support, and educational support.

Provided this information, I declare that I am an individual of Aboriginal/Indigenous Ancestry living on PEI who is facing additional burdens due to COVID-19.

Signature:	Date:

Applicant Information	
Name:	Date of Birth:
Phone Number:	Home Address:
Email:	Number of People in Household (specify # of children):
Do you identify as Indigenous? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say	Is this your first time applying to the program? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say

We have all been impacted by the COVID-19 pandemic. Please describe your specific situation and what assistance you need from the Native Council to better mitigate the pandemic:



Please use this space to provide any other relevant information relating to your application (e.g., landlord information, post-secondary education program, etc.). Please note that for specific bills to be covered, a copy of them must be sent with the application.

Note: the following section is completely voluntary and filling it out will have no impact on your application. The following information will only be used to see if applicants are potentially eligible for the federal government's COVID-19 financial support.

Are you receiving any government COVID-19 related supports (e.g., CRB, EI, CRCB, etc.)?

Yes No

If yes, please list what support:

Have you been laid off from work in the last 12 months?

Yes No Other, explain:

Have you left work to care for someone (e.g., child or elderly person) who is at risk of COVID-19?

Yes No Other, explain:

Did you earn \$5,000 in employment income in 2019?

Yes No Other, explain:

Applications are reviewed bi-weekly by a committee. The COVID-19 Emergency Response Program Coordinator will contact all applicants once their applications have been reviewed. **Applications requesting assistance with specific expenses (e.g., electrical bills) must submit a copy of the bill with the application.** If you have any questions regarding the application or application process, please contact the coordinator:

Ryan Knockwood, Emergency Response Coordinator
 covid@ncpei.com // (902) 629-1541// Office: (902) 892-5314

