



**Moose Cree**  
First Nation



# HARVESTERS SUPPORT PROGRAM

The Moose Cree First Nation Harvesters Support Program is back! The program is designed as a subsidy only and is not intended to cover all harvesting costs. Funds are limited and priority will be given to those in need as per the Harvesters Support Policy.

**Application forms are now available online or at the Moose Cree First Nation office front reception desk.**

**Apply by Friday, March 14, 2014 at 5:00 p.m.**  
*Applications received after this date will not be considered.*

For more information, please contact Joshua Sutherland, Harvesters Support Program Coordinator by phone at (705) 658-4619 ext. 315, or by email at [joshua.sutherland@moosecree.com](mailto:joshua.sutherland@moosecree.com).



# Moose Cree First Nation

## Spring 2014 Harvesters Support Program Application

**Applications are due by Friday, March 14, 2014 at 5:00 p.m.**

*Applications received after this date will not be considered.*

**If you require further information, please contact:**

Joshua Sutherland, Harvesters Support Program Coordinator – joshua.sutherland@moosecree.com

**Telephone:** 705-658-4619 ext. 315, **Fax:** 705-658-4734

**PLEASE PRINT:**

<b>Name of Applicant:</b>	Last Name	First Name	Initial			
<b>Mailing Address:</b>	P.O. Box/RR#/General Delivery/Street					
	City/Town	Province	Postal Code			
<b>Telephone:</b>	Home Telephone	Work Telephone				
<b>Email Address:</b>	Email	Band Number				
<b>Date of Birth:</b>	Year/Month/Day	Age				
<b>Source of Income</b> (Please check box that applies to you)	<input type="checkbox"/>	<b>Pension</b>	<input type="checkbox"/>	<b>Self-Employed</b>	<input type="checkbox"/>	<b>Employed</b>
	<input type="checkbox"/>	<b>Social Assistance/Disability</b>			<input type="checkbox"/>	<b>EI</b>
<b>Transportation</b>	<input type="checkbox"/>	<b>Skidoo/Vehicle</b>	<input type="checkbox"/>	<b>Train</b>	<input type="checkbox"/>	<b>Air</b>

**TO BE ACCOMPANIED BY:** (List all of the people in your group, including children)

Name	Age	Band Number

*Use the other side of this form if you have additional group members*

Location of camp (camp location number): \_\_\_\_\_ Distance: \_\_\_\_\_

How long are you planning to stay at your camp? \_\_\_\_\_

I, \_\_\_\_\_, request travel subsidy for the spring hunt season. I understand that if I receive assistance for the 2014 season it does not mean that I will automatically qualify for assistance in the future. I agree to participate in a follow up survey after the spring harvest season. **Any abuse in privileges will result in the suspension of benefits for a period of twelve months.** On my honour, I declare that all information and statements on this application are true and correct.

**Applicant Signature**

**Date**