



INDIGENOUS HEALTH SUPPORT WORKER DIPLOMA PROGRAM

**2021
APPLICATION PACKAGE**

THE APPLICATION PROCESS

The application process is detailed and will require the commitment of a significant amount of your personal time and effort. The completion of each of the components of this admission package is integral to ensuring that your application will be processed in an effective manner. **The documents listed below must be submitted to Yellowhead Tribal College by May 30, 2021.**

Applicants are also encouraged to submit the necessary documents to meet the funding deadlines set by their sponsors.

- ✓ \$75 Application Fee (General Application and signed waiver form to be included with you Indigenous Community Health Worker Diploma application package);
- ✓ Official High School Transcripts or Official Post-secondary Transcripts, if applicable;
- ✓ Criminal Record Check
- ✓ Confirmation of English 30-1 and final mark of at least 55%, or English 30-2 and final mark of at least 65% prior to the commencement of the program;
- ✓ Current resume;
- ✓ Personal Statement; 500 words
- ✓ Two letters of reference (one should be from the Supervisor of your volunteer or work experience)

PROGRAM APPLICATION CHECKLIST

I have:

Ordered my official high school transcripts from Alberta Learning _____
(Transcripts must be sent from Institution to Institution).

Ordered my official post-secondary education transcripts from all _____
post-secondary institutions that I have attended in the past
(Transcripts must be sent from Institution to Institution).

Attached Criminal Credit Check _____

Attached a copy of my current resume. _____

Attached a copy of my Personal Profile. _____

Attached Two Letters of Reference. _____

Scheduled interview with the IHSW Co-ordinator _____
and/or Elder. (date and name of Elder _____).

*Possession of a criminal record does not restrict applicants from admission to the program. The record will be assessed with respect to the nature of these offense(s), to explore life changes since these events were documented, and to encourage an applicant's commitment to seek pardon on criminal records. A Criminal record **may** limit placement opportunities in the field of Community Health Work.

If you have any questions about the application procedure, please contact:

Normie Carlson,
Indigenous Health Support Worker Coordinator
Yellowhead Tribal College
587-525-6152

E-mail: normie.carlson@ytced.ca

PERSONAL PROFILE

Please answer each of the following questions in paragraph format:
(double-spaced word-processed responses are preferred)

1. Please describe your reasons for pursuing a career in the Indigenous Community Health Profession.
2. Please identify and describe those skills and experiences that you believe indicate your personal suitability to the field of Indigenous Health Support Worker.
3. Leading a healthy lifestyle is an essential requirement for successfully participating in an Indigenous Community Health Worker education program that is founded upon Indigenous values, knowledge and philosophy. Please describe your plans for ensuring that the following elements of your life will be addressed in a healthy manner throughout the duration of your Indigenous Community Health Worker Diploma program.
 - Potential life challenges
 - Family and community commitments
 - Spiritual needs
 - Academic responsibilities
 - Financial considerations
4. In one to two paragraphs please describe your knowledge of Indigenous culture and those community health issues that currently face Indigenous peoples in Canada.

Please forward this reference to:

**Mail, Fax or E-mail:
Normie.carlson@ytced.ca
Yellowhead Tribal College
10045-156 Street
Edmonton, Alberta
T5P 2P7
Phone: 587-525-6152
Fax: 587-524-7275
E-mail: admissions@ytced.ca**

*Please note all reference forms must be received by May 30, 2021

APPLICATION PACKAGE – CONFIRMATION OF REFERENCE REQUESTS

I have provided the following two individuals with a copy of the Reference Form and they have agreed to send the completed form to the attention of the Registrar at Yellowhead Tribal College by mail or fax.

Reference #1: _____

Organization _____

Position _____

Telephone _____

Reference #2 _____

Organization _____

Position _____

Telephone _____

Please forward this reference to:

**Mail, Fax or E-mail:
Normie Carlson
Yellowhead Tribal College
10045-156 Street
Edmonton, Alberta
T5P 2P7
Phone: 587-525-6152
Fax: 587-524-7275
E-mail: normie.carlson@ytced.ca**

Please note: all reference forms must be received by June 30, 2021

APPLICATION PACKAGE- REFERENCE FORM

Name of Applicant _____
Name of Reference _____
Organization _____
Position _____
Telephone _____
How long have you known the applicant? _____
In what capacity have you known the applicant? _____

On a separate page, please respond to the following:

1. Please describe those skills that you believe the applicant possesses that will assist them in successfully completing the Indigenous Health Support Worker Diploma education program (for example, you may describe the applicant's skill level in such areas as interpersonal communication, writing, and time management).
2. Please describe in what ways you believe that the applicant is suited to the profession of Indigenous Health Support worker.
3. Please comment, as applicable, upon the applicant's past or potential contributions to Indigenous Community Health work practice with Indigenous peoples.

Date: _____ , Signature of person completing form: _____

Please forward this reference to :

Mail, Fax or E-mail:

Registrar

Yellowhead Tribal College

10045-156 Street

Edmonton, Alberta

T5P 2P7

Phone: 780-484-0303

Fax: 587-524-7275

E-mail: admissions@ytced.ca

Please note: all reference forms must be received by June 30, 2019

APPLICATION PACKAGE- REFERENCE FORM

Name of Applicant _____
Name of Reference _____
Organization _____
Position _____
Telephone _____
How long have you known the applicant? _____
In what capacity have you known the applicant? _____

On a separate page, please respond to the following:

4. Please describe those skills that you believe the applicant possesses that will assist them in successfully completing the Indigenous Community Health Worker Diploma education program (for example, you may describe the applicant's skill level in such areas as interpersonal communication, writing, and time management).
5. Please describe in what ways you believe that the applicant is suited to the profession of Indigenous Community Health work.
6. Please comment, as applicable, upon the applicant's past or potential contributions to Indigenous Community Health work practice with Indigenous peoples.

Date: _____ , Signature of person completing form: _____

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