



Uqqujjait Innarnut Elders Support

APPLICATION FORM



TO APPLY

for a lifetime payment from the Nunavut Tunngavik Inc.'s (NTI)
Uqqujjait Innarnut - Elders Support you must:

- ✓ Be born between 1 January 1949 to 31 December 1961;
- ✓ and Be Inuk enrolled in the *Nunavut Agreement*.

If you meet these criteria, fill in this application form and you can provide it to your Community Liaison Officer.
You can also email the application form as an attachment to: uqqujjaitinnarnut@tunngavik.com

CLEAR

PRINT

SAVE AS

Mailing Address: Nunavut Tunngavik Inc.
Uqqujjait Innarnut - Elders Support Program
PO Box 280, Rankin Inlet,
NU X0C0G0

Tel: 867-645-5400
Fax: 867-645-3451
Toll Free: 1-888-236-5400

www.tunngavik.com

PERSONAL INFORMATION		
Last Name:		First Name:
Address:		
Community:	Province/Territory:	Postal Code:
Home Phone Number:	Business Phone Number:	Mobile Phone Number:
NTI Enrolment Number:		Birthdate:
METHOD OF PAYMENT		
CHEQUE PAYMENTS – I wish to receive my monthly payment by cheque in the mail. <input type="checkbox"/>		
DIRECT DEPOSIT – I wish to receive my monthly payment in the form of a direct deposit to my bank account. I understand that I may receive my first few payments by mail in the form of a cheque until direct deposit arrangements can be made with my financial institution. <input type="checkbox"/>		
Name of financial institution:		Account number:
Address of financial institution:		
City:	Province/Territory:	Postal Code:
Signature:		Date:
FOR OFFICE USE ONLY		
Notes:		
Pension Number:	No Registered:	Missing Information:
Date Received:	Signature:	Name: