

ONGOMIIZWIN - EDUCATION

Part 1 Membership Form

Application Procedure

1. Please complete this form and return it, along with a copy of your student card and proof of Indigenous Ancestry (Status or Metis card), to S206 Medical Services Building at 750 Bannatyne Avenue.
2. You will be contacted by email to schedule a meeting and tour once your membership application has been approved.
3. Upon approval you will be granted 24/7 access to the centre through your student card.

Application Information (please print clearly)

Last Name _____ First Name _____

Address _____ Phone Number _____

City _____ Province _____ Postal Code _____ Student Number _____

College _____ Year in College _____

U of M email _____

Indigenous Ancestry First Nations Metis Inuit Expected Year of Graduation _____

Do you speak other languages? Yes No If yes, please indicate language(s): _____

Community/Band of Indigenous origin? _____

In Case of Emergency

Name of local friend or relative _____

Relationship _____

Phone Number _____

The above information is true to the best of my knowledge. I understand that I am expected to treat the centre with care and respect. I also authorize by signing below that my membership is pending by ongoing approval, any misuse or abuse of the centre will result in my card being denied access.

Signature _____ Date _____

For Administration Use Only

Signing Authority _____ Date _____



Part 2 Reflection

Please Print

How did you hear about us?

What are your expectations of the centre?

How can Ongomiizwin Education support you in your field of study?

What are some ways you plan to build relationships within Ongomiizwin Education during the course of your program?

How can Ongomiizwin Education assist you in connecting with or strengthening your identity as an Indigenous person (i.e. hosting ceremonies, sharing circles, workshops etc.)?



UNIVERSITY OF MANITOBA | Rady Faculty of Health Sciences

umanitoba.ca/ongomiizwin