



APPLICATION FOR MEMBERSHIP

The Indigenous Helpers Society Inc. is made up of Indigenous Peoples who have demonstrated their commitment to helping themselves and others to achieve wellness.

We are a society comprised of individuals who have developed our helping abilities through various processes including education, mentorship, and on-the-job-training. In addition, we recognize natural helpers who have used their life experiences to develop their abilities to help others and who are recognized as such by Indigenous Communities.

VALUES

Our Indigenous cultures are the foundation upon which our values are based:

- 1. Our cultures' teachings include, but are not limited to:** faith, honesty, kindness, respect, courage, humility, sharing, harmony, balance, knowledge, wisdom, patience, humor, integrity, compassion.
- 2. Support:** We believe in supporting our Society's membership through emotional support, advocacy and networking. We believe in supporting Indigenous Peoples through education and advocacy.
- 3. Education:** We believe in educating our Society's membership, Indigenous Communities, and the general population through cultural teachings, information sharing, seminars, workshops, and conferences.
- 4. Life and People:** We believe in the sacredness and goodness of life. We are all part of Creation with unique gifts, abilities and contributions.

PHILOSOPHY STATEMENT

As Indigenous Helpers, we believe in the sacredness and goodness of life and are guided by our cultural teachings. In following our holistic way of life, we honor the strengths of individuals, families, communities, and nations, and believe in our Peoples' gifts, abilities, and life experiences. We strive to contribute to the wellness of all through the excellence in service that stems from and is consistent with our cultural values, beliefs, and practices.

VISION

The Indigenous Helpers Society Inc. is an inspirational, self-sustaining organization determining and supporting our own cultural ways of conduct and practice in the helping professions. All of our activities are directed to the wellness of Indigenous Peoples.

1) APPLICANT INFORMATION			
Name:			
Address		Postal Code:	
Phone:		Cell:	
Email:			
2) INDIGENOUS IDENTIFICATION			
<input type="checkbox"/> Ojibway / Anishinaabe	<input type="checkbox"/> Cree / Inineew	<input type="checkbox"/> Dakota	<input type="checkbox"/> Dene
<input type="checkbox"/> Oji-Cree	<input type="checkbox"/> Metis	<input type="checkbox"/> Inuit	<input type="checkbox"/> Indigenous Heritage
<input type="checkbox"/> Other (Please identify)			
3) EMPLOYMENT			
Present Employer:		Position:	
Address:		Postal Code:	
Phone:		Cell:	
Email:		Length of Employment	
4) EDUCATION			
Name and Location of Institution:	Program:	Dates:	

5) LIFE EXPERIENCE: (Feel free to attach a written outline of life experiences related to helping and healing, eg. volunteer work with youth at risk, personal experiences in healing from concerns such as addictions/abuse, etc.)

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6. PERSONAL / PROFESSIONAL DEVELOPMENT

Training / Courses:	Date(s):	Total Days:
Volunteer Activities:	Date(s):	Total Days:
Self-Development Activities:	Date(s):	Total Days:

REFERENCES: Two written reference letters from persons who are willing to be contacted and are working in social services are required upon initial application. These references are to validate your commitment and connection and/or involvement with Indigenous communities.

Name	Title	Address	Phone

7) CHECKS		
<input type="checkbox"/> Attached	CRIMINAL RECORD WITH VULNERABLE SECTOR CHECK: You are required to complete a criminal record with vulnerable sector check and submit it to the Indigenous Helpers Society dated within 3 months of your application. The information will be treated as confidential. Any fee for this service is the responsibility of the applicant.	
<input type="checkbox"/> Attached	CHILD ABUSE REGISTRY CHECK: You are required to complete a child abuse registry check and submit it to the Indigenous Helpers Society dated within 3 months of your application. The information will be treated as confidential. Any fee for this service is the responsibility of the applicant.	
A criminal conviction or registration as an offender on the Child Abuse Registry will not necessarily be considered a negative factor in the application for membership process. However, if the applicant's criminal record check identifies that the applicant has a criminal conviction or is registered on the Child Abuse Registry as an offender, the applicant will be required to participate in a personal interview or Circle.		
8) MEMBERSHIP		
<input type="checkbox"/> Full Membership	If you are an Indigenous person and have at least four years of work experience (either voluntary or paid), education, or direct life experience that can be substantiated and which relates to social services, you are eligible for Full Membership.	
<input type="checkbox"/> Ally / Associate Membership	Individuals with less than four years and/or are non-Indigenous are eligible for Ally/Associate Membership.	
While all members are able to be actively involved and have voting privileges in the Society, Full members have the additional right to vote on matters pertaining to the Society's By-Laws. Therefore, you only have to identify the amount criteria in points 2, 3, 4, 5 and 6 above that will help us determine whether you are eligible for Full or Ally/Associate membership.		
9) Membership Fees		
<input type="checkbox"/> Full	\$100.00	
<input type="checkbox"/> Ally/Associate	\$100.00	
<input type="checkbox"/> Student	\$50.00	Currently enrolled in an accredited University or College Human Resources, Social Services, or Social Work program.
<input type="checkbox"/> Corporate	1 – 15	\$100.00 per member
	16 – 100	\$85.00 per member
	100+	\$75.00 per member
Payment		
<input type="checkbox"/> Cheque: Make cheque payable to the Indigenous Helpers Society, Inc.	<input type="checkbox"/> E-Transfer: Can be made to indigenoushelperssociety@gmail.com	<input type="checkbox"/> Cash: Please contact a Board Member if you wish to pay cash.
If the membership fee is a barrier, please contact the Indigenous Helpers Society. Elders and Traditional Knowledge Keepers are welcome to the table.		

10) VOLUNTEERING	
Are you willing to volunteer your time and abilities to the Indigenous Helpers Society (IHS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a trainer or facilitator?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, would you be willing to deliver a presentation/workshop to Indigenous Helpers Society members?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What are the last 3 presentations/workshops you delivered?	
<p>DECLARATION: I do hereby make application to become a member of the Indigenous Helpers Society, Inc. and certify that the information provided herein is true and complete. Filling in signature box will confirm declaration.</p>	
Date:	Signature:
<p>AUTHORIZATION: I hereby authorize/consent the Indigenous Helpers Society, Inc. only to release and review my personal information to determine eligibility for membership. I also authorize Indigenous Helpers Society, Inc. to contact my references to determine eligibility. Filling in signature box will confirm authorization and consent to release information to determine eligibility for membership.</p>	
Date:	Signature:

All information collected in this application will be used for the purposes of determining eligibility for membership with Indigenous Helpers Society, Inc. All information is protected by the Protection of Privacy provisions of the Freedom of Information and Protection of Privacy Act.

OFFICE USE		DATE FORM REVISED:	November, 2018
Reviewed Date:	Reviewed by:	Eligibility:	<input type="checkbox"/> Full Membership <input type="checkbox"/> Ally/Associate Membership
Approved Date:	Approved by:	Registration Fee:	<input type="checkbox"/> Attached <input type="checkbox"/> Pending
References Checked	Checked by:	Received:	<input type="checkbox"/> Criminal Record with Vulnerable Sector Check <input type="checkbox"/> Child Abuse Registry Check