



Kuukpik CARES

Economic Support Program

Please see the accompanying Guidelines and Application Instructions for assistance on successfully completing this form.

1. SHAREHOLDER INFORMATION

Shareholder Name: _____

Shareholder Date of Birth: _____

Phone: _____ Email: _____ Date: _____

Kuukpik staff will use this contact information if there are problems with your application. If you do not provide good contact information, you may not be able to correct any problems. As a result, your application could be denied.

The Shareholder is: An Adult Under the Age of 18

If you marked the circle for "An Adult", please **SKIP** Section 2. If you marked the circle for "Under the Age of 18", please **COMPLETE** Section 2.

2. MINOR SHAREHOLDER STOCK CUSTODIAN INFORMATION

All Kuukpik shareholders under the age of 18 have a Stock Custodian. The Stock Custodian is usually, but not always, the shareholder's parent. Only the Stock Custodian of record may complete this application on behalf of a minor. **Please see Application Instructions Part 2 for more detail on Minor Stock Custodians.**

I am completing this application for the minor Kuukpik shareholder whose name I wrote above **AND** I am the Stock Custodian of record for this minor's Kuukpik stock.

Stock Custodian (My) Name: _____

3. COVID-19 HARDSHIP:

Please briefly describe the financial hardship or unusual expenses incurred from the pandemic.

4. ELIGIBLE FUNDING AMOUNT REQUESTED:

Please state the **COVID-19 Pandemic caused** expenses incurred, or living expenses you must pay following a COVID-caused loss of income, for which you are requesting funding. All expenses must be incurred between March 1, 2020 and December 31, 2021. **Please see Application Instructions Part 4 for more detail on eligible expenses.** You must identify a total amount requested.

Loss of income \$ _____

Housing \$ _____

