

COMPASSIONATE TRAVEL PROGRAM APPLICATION Letter From Authority FORM 2

TO: Qikiqtani Inuit Association Community Liaison Officer 200-922 Niaqunngusiariaq St, NU XOA 3H0 Phone: (867) 975-8400 Toll Free: 1-800-667-2742 Email: <u>Griefandbereavement@qia.ca</u> Website: www.qia.ca	From:
	P.O. Box,NU, -
	Tel: Cellphone: Email:
Letter from Applicant	
We, the immediate family member of the lat Ofare requ (community) provide assistance to the following three (3)	
(Name)	(Community)
(Name)	(Community)
(Name)	(Community)
Print Name	Authorized Family Member Signature

Date

Who is considered to be a family member?

Eligible "family members" include grandmother, grandfather, mother, father, spouse, daughter, son, sister, brother, grandchildren, aunt, uncle, niece, and nephew. Flexibility in family relations may be exercised by a RIA in order to respectfully honor the wishes and choices of next of kin or the immediate family members.