

2022-23 FNYIYES Summer Work Experience Program (SWEP) FINAL REPORT TEMPLATE

FINAL REPORT DUE: February 28, 2023
Note: Submit Final Report and Youth Evaluation Form

First Nation Name:	
Mailing Address	P.O Box No.: Address: City: Province: Postal Code: Phone number:
Primary Contact Information	Name: Title/position: Telephone number: Email: Fax No.:
Secondary Contact Information (Preferably a contact from Finance)	Name: Title/position: Telephone number: Email: Fax No.:

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For each work placement, please provide the following info:

Note: If you added more work placements please copy the fields below and continue to add each placement until you are done.

Work Placement 1

Job Title	
Start/End Date	
Employer	
Hourly Wage	
Total Hours Worked	
Total Wages (Hourly Wage x Total Hours of Work)	
Completed Activities	
Completed Results	

Work Placement 2

Job Title	
Start/End Date	
Employer	

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Hourly Wage	
Total Hours Worked	
Total Wages (Hourly Wage x Total Hours of Work)	
Completed Activities	
Completed Results	

Work Placement 3

Job Title	
Start/End Date	
Employer	
Hourly Wage	
Total Hours Worked	
Total Wages (Hourly Wage x Total Hours of Work)	

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Completed Activities	
Completed Results	

Work Placement 4

Job Title	
Start/End Date	
Employer	
Hourly Wage	
Total Hours Worked	
Total Wages (Hourly Wage x Total Hours of Work)	
Completed Activities	
Completed Results	

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Final Program Budget: If placements require any of the below additional costs, please complete:		
Expense Type	Final Expense Breakdown <i>(please list all expenditures separately and explain how amount is calculated)</i>	Final Total
Total Cost of Work Placement(s) – example: add up total wages for each work placement you are applying for.		
Mandatory Employment Related costs (MERCS) such as gross employee share of CPP, EI, vacation pay, WCB and where applicable, health insurance premiums.		
Other necessary costs directly related to a work placement, including (but not limited to): criminal record check, required uniforms, personal safety gear (e.g. work boots, safety hats) up to a maximum of \$300 per participant;		
Actual cost for special equipment and facilities to accommodate the needs of a disabled individual up to a maximum of \$3,000, if applicable;		
Sub-Total:		
Administration Cost (max. 5% of sub-total cost):		
Final Total Cost:		

Please describe all other expected contributions to the program (project partner costs), including financial and/or in-kind service:

Signature:

Final Report & Youth Evaluation Deadline: **February 28, 2023**
Submit via email to soniao@fnesc.ca or by fax to 604-925-6097