



# 2021

## NATIVE COUNSELLOR TRAINING PROGRAM INFORMATION BOOKLET

**ONTARIO NATIVE EDUCATION  
COUNSELLING ASSOCIATION**

37A Reserve Road, Box 220,  
Naughton, ON P0M 2M0

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## BACKGROUND

The Native Counsellor Training Program (NCTP) was established in 1977 as a result of the diverse challenges faced by First Nation Education Counsellors and the lack of culturally specific programming available for individuals wishing to pursue careers in education counselling.

Graduates of NCTP receive a Certificate issued by the Ministry of Education (MOE). This unique credential is the only one of its kind in Ontario.

## PROGRAMS OF STUDY FOR 2021

Curriculum focuses on the study of education counselling theories and techniques from a First Nations perspective and provides the opportunity for an on-the-job application. The program is three (3) years in duration.

### 1<sup>st</sup> Year – Part I

- COUNSEL-1: Counselling Practicum & Theory Part I
- SCH-CAR-GUID: School & Career Guidance Part I
- SOC-NAT-PEOP: Sociology of Native People
- ED-SYS-ONT: Education Systems in Ontario

### 2<sup>nd</sup> Year – Part II

- COUNSEL-2: Counselling Practicum & Theory Part II
- SCH-CAR-GUID-2: School and Career Guidance Part II
- NAT-ISS: Native Issues
- INFO-PRO: Information Process/Career Planning

### 3<sup>rd</sup> Year – Part III

- Field Practicum – 5 week placement in local agencies/organizations

## CULTURAL ACTIVITIES

Students' learning experience is further enhanced through extra activities and a variety of student support services. A variety of activities are planned throughout the duration of the program. These activities are scheduled outside of regular class hours and are designed to reinforce cultural curriculum within the program as well as to build a sense of community by providing opportunities for students, to interact.

### Examples of activities include:

- Tutoring
- Circles
- Craft workshops
- Personal wellness workshops
- Recreational Activities



## EMPLOYMENT OPPORTUNITIES

Graduates of the Native Counsellor Training Program will be equipped with the skills required to perform in numerous work environments. Previous graduates have found employment in various sectors of the Counselling field such as: youth workers, prevention, student support, elder programming, health care workers, government agencies, schools, postsecondary institutions and community initiatives.

## ADMISSION REQUIREMENTS

Applicants must meet one of the following criteria to gain entry into the program.

1. High School Diploma
3. Successfully completed and passed the GED and have at least 5 years counselling experience
4. A mature student and a letter of recommendation from either a First Nation Administrator or an official of the Native Organization
5. **ALL** Part III students who will be going on placement must submit proof of a current First Aid/CPR certificate.
6. **ALL** students are required to submit a CPIC/Vulnerable Sectors Screen.

## COSTS

PROGRAM	Tuition	Ancillary Fee	Text Book	Total
NCTP Part I*	No Charge			
NCTP Part 2	TBD	TBD	TBD	TBD
NCTP Part 3	TBD	TBD	TBD	TBD

**\*Optional Fee: Laptop Loan Program - Deposit - \$700.00** Loan Program includes shipping. Refundable \$500.00 when the laptop is returned. Students will receive a laptop with all the lessons and course materials for each part preloaded on the computer. Once the laptop is returned, the sponsor will receive a refund of \$500.00.



## SUPPLIES

Students are required to supply their own paper, writing, etc. supplies. Extra-Curricular Activities will be determined during the course.

**There are risks involved in participating in all extra-curricular activities and field trips. All students willing to participate or are involved with all NCTP activities and field trips must sign a consent form.**

## SPECIAL NEEDS

I have an Individual Education Plan (IEP) Circle your answer  
(Include with this application)

Yes

N/A

## ACADEMIC INTEGRITY

At ONECA we take academic integrity very seriously and we want to support you to participate meaningfully and honestly in our courses. When you sign this document, you are agreeing to confirm that you understand your responsibilities. Cheating, plagiarism, and any other sort of academic dishonesty will not be tolerated.

## NCTP APPLICATION FORM



Please complete the form in full, by computer or by hand, printing clearly in ink. If additional space is required, attach a separate sheet, indicating the section number that it refers to. Return one original of the form in hard copy to:

ONECA  
37 A Reserve Road, Box 220  
Naughton, Ontario P0M 2M0  
Email: [oneca@oneca.com](mailto:oneca@oneca.com)

If you send your application by e-mail, please send the hard copy as well. Your application should reach ONECA by the deadline given in the course announcement. Forms that are incomplete (including \$50 application fee) will not be considered. Email addresses need to be clearly legible.

Form is available online at: [Application Form](#)

Or downloadable from: [Application in PDF Format](#)

### FUNDING FOR COURSE PARTICIPATION

Applicants are encouraged to seek scholarships in their own communities. Always allow ample time for applications to be processed and inform ONECA immediately of the results. ONECA will provide acceptance letters.

If accepted as a course participant, I will investigate the following sources of funding:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

## REFERENCES



Your application will not be considered unless this section is correctly filled in by the person endorsing the application. Note to references: the NCTP program is committed to producing professional education counsellors grounded in indigenous worldviews and practices and providing tools to ensure the success of indigenous people in Ontario. Therefore, we ask that you give thoughtful endorsement of applicants.

The undersigned:

1<sup>ST</sup> REFERENCE

-----  
NAME TITLE OR POSITION

INSTITUTION OR ORGANIZATION \_\_\_\_\_

-----  
ADDRESS TELEPHONE (+ area code) FAX (+ area code ) E-MAIL

endorses the application of the candidate:

NAME.....

I have known the applicant for at least two years and, to the best of my knowledge and belief, consider him/her to be a good fit, committed to the education, ideals and aspirations of indigenous people and therefore, to be a student of the NCTP PROGRAM.

-----  
SIGNATURE OF PERSON ENDORSING APPLICATION DATE



**2nd REFERENCE**

-----  
NAME TITLE OR POSITION

INSTITUTION OR ORGANIZATION \_\_\_\_\_

-----  
ADDRESS TELEPHONE (+ area code) FAX (+ area code ) E-MAIL

endorses the application of the candidate:

NAME.....

I have known the applicant for at least two years and, to the best of my knowledge and belief, consider him/her to be a good fit, committed to the education, ideals and aspirations of indigenous people and therefore, to be a student of the NCTP PROGRAM.

-----  
SIGNATURE OF PERSON ENDORSING APPLICATION DATE

**3rd REFERENCE**

-----  
NAME TITLE OR POSITION

INSTITUTION OR ORGANIZATION \_\_\_\_\_

-----  
ADDRESS TELEPHONE (+ area code) FAX (+ area code ) E-MAIL

endorses the application of the candidate:

NAME.....

I have known the applicant for at least two years and, to the best of my knowledge and belief, consider him/her to be a good fit, committed to the education, ideals and aspirations of indigenous people and therefore, to be a student of the NCTP PROGRAM.

-----  
SIGNATURE OF PERSON ENDORSING APPLICATION DATE





## APPLICANT'S STATEMENT

- I apply to the Council for admission as a Student of the Native Counsellor Training Program (NCTP) with this application and confirm that the information I provide is true and complete.
- I confirm that I am a fit and proper person to be admitted as a Student of NCTP.
- I confirm that I do not have any criminal convictions and will produce a clear CPIC/VS.
- I understand that the completion of this application does not constitute approval into the program.
- If my application is approved, I understand and agree:
  - to conform to the policies of the NCTP program and any traditional protocols as now exists, or as may in future be altered, amended or enlarged, and I will, to the best of my ability, promote the objects of the NCTP program.
  - To the Academic Integrity Policy
  - To ONECA sharing my course results
- I understand that ONECA, as the organization responsible for the NCTP, may inspect education credentials and employment references and request further information as warranted.

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APPLICANT'S SIGNATURE

DATE

## ATTACHMENTS TO THIS APPLICATION

- ✓ Additional References or Recommendation Letters, if necessary
- ✓ CPIC /VS (if completed within last 3 months) or new one
- ✓ Individual Education Plan (IEP), if applicable
- ✓ Copy of Education Credentials
- ✓ Consent to Share Personal Information
- ✓ **Abstinence Agreement**
- ✓ **Confidentiality Declaration**
- ✓ **Part III students only:** Copy of Immunization and TB test. \$50.00 Application Fee payable to O.N.E.C.A.



## Consent to Share Personal Information

Personal information on this form is collected under the Freedom of Information and Protection of Privacy Act as it relates directly to and is necessary for determining your eligibility for the NCTP program through ONECA. If you have any questions about this collection of personal information you may contact the Coordinator of the NCTP program.

I \_\_\_\_\_ understand that to administer, monitor and evaluate my NCTP training, ONECA may need to collect or provide personal information about me to:

- My current and former employers
- Training providers or past workplaces that have provided technical training or work experience to me.
- Government officials responsible for certification programs and funding streams in Ontario and/or Canada.
- Other provincial government education branches, schools, school divisions to verify education credentials.
- Ministry of Education, other government funding bodies and or First Nation governments to assist in obtaining financial support and/or verifying progress, enrichment, or any ancillary items related directly to me.
- Emergency contacts or alternate contacts.

### NCTP Candidate Signature

• I understand the “Consent to Share Personal Information” and I hereby make application for The NCTP program, and I declare that:

- The information I have provided is true and complete in all respects and that I have not withheld any relevant information.
- I will notify ONECA of any subsequent changes in the information contained on this application.
- I will notify ONECA of any change of employer during my training.

Signature of Applicant and Date:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Abstinence Agreement



### **NCTP ALCOHOL & DRUG USE POLICY**

The NCTP creates a healthy community life for all students, staff and our families. One of the integral aspects of that community life is the agreement by all community members to abstain from drugs and alcohol (other than those prescribed by a physician) during the 5-week period of the program. This commitment enhances our atmosphere of respect and healing while at the same time guides us on a healing path and acknowledges our position as role models and helpers.

In recognition of the above and in keeping with past recommendations of students and staff, we ask that all Program Team Members and Students and guests sign this Abstinence Agreement to solidify our commitment and direction throughout the program. Please read and sign below:

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I acknowledge my obligation to remain drug and alcohol free throughout the entire duration of the program. Further, to support the NCTP community I also acknowledge and agree to bring to the attention of the Program Coordinator any infractions in order to protect the positive and responsible environment we are attempting to create.

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Name of student/Program Team Member (please print)

Date:

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Student/Program Team Member/Guest Signature

## Confidentiality Declaration



I, \_\_\_\_\_, hereby declare I will hold in confidence any information that comes to my attention related to any Student or Program Team Member of the Native Counsellor's Training Program during my participation in the program. I agree not to disclose any information regarding meetings, counselling sessions or the affairs of the Ontario Native Education Counselling Association.

Name: \_\_\_\_\_

(Please Print)

Please check the appropriate box

Student  NCTP Program Team Member

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Witness Name: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Date: \_\_\_\_\_