



# SIKSIKA NATION ADMINISTRATION

## Treasury

### Siksika Nation Entrepreneur Relief Application Form

Business Owner Name:	
Phone #:	Address:
Band #:	Email Address:
Business Name:	
Type of Business: <small>e.g. Transportation, Retail, Arts &amp; Crafts, Consulting, Construction, Tourism, Health &amp; Beauty, Entertainment, Other</small>	
Years Active:	
Registered Business Number:	Yes      No
Capital Assets greater than \$20,000: (Please provide brief description)	Yes      No
Number of Siksika Nation Employees – including business owner: <small>Please indicate whether they are Full-time (FT) or Part-time (PT)</small>	
Revenue loss due to COVID-19: (Please provide brief description)	Yes      No
Additional Expenses related to COVID – 19: (Please provide brief description)	Yes      No
Other Comments:	

Deadline: July 28, 2021 at midnight, **NO EXCEPTIONS AFTER DEADLINE.**

Supporting documentation to be provided upon request. Email submissions to:

[Treasuryboard@siksikanation.com](mailto:Treasuryboard@siksikanation.com)