ᓄᓇᕗᒻᒥ ᒐᕙᒪᒃᑯᓐᓂ ᐃᖅᑲᓇᐃᔮᒃᓴᖅ

• ᓄᓇᕗᑦ ᒐᕙᒪᖓᑦ ᐱᔪᒪᓂᖃᕐᒪᑕ ᐋᖀᓗᑎᒃ ᐃᑲᔪᖅᑎᐅᓂᐊᖅᑐᓂᒃ ᐃᖅᑲᓇᐃᔭᕐᕕᖕᓂ ᑐᑭᓯᒃᑲᓐᓂᕈᓐᓇᕐᓂᐊᕐᒪᑕ ᐊᒻᒪᓗ
ᐱᔨᑦᑎᑦᑎᐊᕐᓗᑎᒃ ᐱᔭᕆᐊᖃᖅᑕᖏᓐᓄᑦ ᓄᓇᕗᒻᒥᐅᑦ. ᐱᑎᑕᐅᖅᑳᕐᓂᐊᖅᑐᑦ ᓄᓇᕗᒥ ᓄᓇᖃᖅᑳᖅᓯᒪᔪᑦ.
• ᐱᓇᔪᒃᑐᑦ ᓇᓗᓇᐃᑦᑎᐊᕆᐊᖃᖅᑐᑦ ᖃᐅᔨᔭᐅᖁᓪᓗᒋᑦ ᐱᔪᓐᓇᕐᓂᖏᑦ ᑲᒪᒋᔭᐅᖅᑳᕈᒪᔪᑦ ᓄᓇᕗᒻᒥ ᐱᔭᐅᕐᓂᐊᖅᑐᑦ ᒪᓕᒐᖓ
ᒪᓕᒡᓗᒍ.
• ᐃᖅᑲᓇᐃᔮᒃᓴᑦ ᐃᓚᖏᑦ ᐱᖃᕆᐊᖃᕐᒪᑕ ᐱᕋᔭᖕᓂᑰᖏᒃᑲᓗᐊᕐᒪᖔᑦ ᖃᐅᔨᓴᕈᑎᓂᒃ.
• ᐃᖅᑲᓇᐃᔮᒃᓴᖅ ᐅᓂᒃᑲᐅᓯᖏᑦ ᐱᔭᐅᔪᓐᓇᖅᑐᑦ ᓱᒃᑲᔪᒃᑯᑦ, ᖃᕆᑕᐅᔭᒃᑯᑦ ᐅᕝᕙᓘᓐᓃᑦ ᐃᑭᐊᖅᑭᕕᒃᑯᑦ.
• ᑕᐃᒃᑯᐊ ᓂᕈᐊᖅᑕᐅᔪᑐᐊᑦ ᐊᐱᖅᓱᖅᑕᐅᓂᕐᒧᑦ ᖃᐅᔨᒃᑲᖅᑕᐅᓂᐊᖅᑐᑦ.

ᑎᑎᕋᕐᕕᒋᓗᒍ: ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᔨᒃᑯᑦ ᓄᓇᕗᒻᒥ ᒐᕙᒪᖓ

ᑎᑎᖅᑲᒃᑯᕕᐊ 1000, ᓈᓴᐅᑖ 1000
ᐃᖃᓗᐃᑦ, ᓄᓇᕗᑦ X0A 0H0

ᐅᖃᓘᑖ: (867) 975-8600 EXT 5012
ᐊᑭᖃᙱᑦᑐᖅ: 1-800-663-5738
ᓱᒃᑲᔪᒃᑯᑦ: (867) 975-8609
ᐃᕐᖐᓐᓈᕈᑦ: Nunavutnurses@gov.nu.ca

ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᓗᐊᖅᓴᐃᔨ, ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᖅ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᔨᒃᑯᑦ

ᐃᒡᓗᓕ`ᒐᕐᔪᒃ-ᒥ, ᑕᓗᕐᔪᐊᒥᑦ, ᓇᐅᔮᓂ, ᑭᖕᖓᐃᑦᒥ, ᓴᓂᕋᔭᒥ

ᐱᔭᕆᐊᖃᕋᑦᑕ ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᓗᐊᖅᓴᐃᔨᓂᒃ ᐃᓂᑖᕐᓗᑎᒃ ᐃᖅᑲᓇᐃᔮᒃᓴᓂᒃ ᓇᓂᕈᓘᔭᖅ ᓄᓇᓕᖕᓂ ᓄᓇᕗᒻᒥ. ᐃᖅᑲᓇᐃᔭᓕᖅᑎᑕᐅᔪᖅ ᑖᔅᓱᒧᖓ ᐃᖅᑲᓇᐃᔮᒃᓴᒧᑦ ᐱᑎᑦᑎᕙᒃᓗᓂ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐱᔨᑦᑎᕋᐅᑎᓂᒃ ᐃᓄᖕᓄᑦ ᑲᑎᙵᔪᓄᓪᓗ ᓄᓇᓕᖕᒥ ᒪᓕᒃᓗᒍ ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐱᓕᕆᐊᒃᓴᖓᑕ ᒪᓕᒐᒃᓴᖏᑦ ᐋᖅᑭᒃᑕᐅᓯᒪᔪᖅ ᐃᓱᒪᑕᕐᒧᑦ ᐋᓐᓂᐊᖅᑐᓕᕆᓂᕐᒧᑦ ᑎᑎᕋᖅᑎ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᔨᒃᑯᓐᓄᑦ (CMOH). ᑕᐅᑐᓪᓗᐊᑕᕐᓗᓂ ᕿᑐᕐᖓᒃᓴᓖᑦ/ᓄᑕᖅᑲᑦ ᖃᓄᐃᓐᓂᖏᓐᓂ, ᖃᓂᒪᓐᓇᕈᑎᑦ ᐋᓐᓂᐊᓕᕇᒃᑯᑎᓕᕐᑕᐅᓂᕐᒧᓪᓗ ᐱᓕᕆᐊᒃᓴᑦ. ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᓗᐊᖅᓴᐃᔨ ᐱᔨᑦᑎᕋᕐᐸᖕᒥᓗᓂ ᐱᕕᒃᓴᐅᓗᓂ ᐃᓄᖕᓄᑦ ᑲᑎᙵᔪᓄᓪᓗ ᐃᓗᐊᓂ ᓄᓇᓕᐅᑉ, ᐱᑎᑦᑎᓗᓂ ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᖃᓅᓇᓱᒋᔭᖏᓐᓂ ᓄᓇᓕᖕᒧᑦ ᐊᑐᓕᖅᑎᑕᐅᔪᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᖁᕝᕙᕆᐊᖅᑎᑦᑎᓂᕐᒥ ᒪᓕᒐᒃᓴᖏᓐᓂ.

ᐃᓕᓐᓂᐊᕐᓂᑯᖏᑦ: ᐊᕐᕌᒍᓄᑦ ᑎᓴᒪᓄᑦ ᐃᓗᐊᖅᓴᐃᔨᐅᓂᕐᒧᑦ ᑲᓇᑕᒥᐅᓄᑦ ᓯᓚᑦᑐᖅᓴᕐᕕᒃᔪᐊᒥ ᐅᕝᕙᓘᓐᓃᑦ ᐊᖏᖅᑕᐅᓯᒪᔪᒥᒃ ᐊᔾᔨᕐᓚᖓᓂᒃ ᐃᓚᐅᖃᑕᐅᔪᓐᓇᐅᑎᒥᒃ ᐊᑎᓕᐅᖅᑕᐅᓯᒪᓂᒃᑯᑦ ᐊᑎᓕᐅᖅᑕᐅᓯᒪᔪᑦ ᐃᓗᐊᖅᓴᐃᔨᑦ
ᐊᖏᖅᑕᐅᓯᒪᔪᑦ ᓄᓇᑦᓯᐊᒥ/ᓄᓇᕗᒻᒥ
ᐊᓂᖅᓵᖅᑎᑦᑎᓇᓱᒍᓐᓇᐅᑎᒥᒃ ᐱᖃᕆᐊᓕᒃ
ᐊᕐᕌᒎᖕᓄ ᒪᕐᕉᖕᓄ ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᓗᐊᖅᓴᐃᔨᐅᓂᑰᓗᓂ ᐱᔭᕆᐊᓕᒃ ᐊᑐᖅᑐᒥᒃ ᐊᖁᑦᑐᓐᓇᐅᑎᖃᕐᓗᓂ ᐱᔭᕿᐊᓕᒃ

ᐊᓯᖏᑦ: ᐊᑐᕐᓂᑰᓗᓂ ᓄᓇᓕᕋᓛᒥ ᐃᓄᖃᓗᐊᙱᑦᑐᒥᓗ ᓄᕼᓕᖕᓂ ᐱᒋᔭᕆᐊᖃᖅᑕᖓ
ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᖅᑲᓇᐃᔭᕐᕕᒃ ᑲᓇᑕᒥ (PHAC) ᐊᔪᙱᓪᓗᓂ ᖃᕋᓴᐅᔭᒃᑯᑦ
ᐃᓕᓐᓂᐊᕈᑎᓂᒃ ᐱᒋᔭᕆᐊᖃᖅᑕᖓ

ᓄᓇᓕᖕᓂ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᐃᓕᓐᓂᐊᒐᒃᓴᖅ (CHNC) ᓇᓗᓇᐃᒃᑯᑕᖃᕐᓗᓂ ᐱᒋᔭᕆᐊᖃᖅᑕᖓ

ᓂᕈᐊᖅᑕᐅᓇᓱᒃᑐᖅ ᖃᐅᔨᒪᓂᖃᕐᒥᓗᓂ ᒫᓐᓇᐅᔪᒧᑦ ᐊᓯᔾᔨᖅᐸᓪᓕᐊᓂᐅᔪᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᖁᕝᕙᕆᐊᖅᑎᑦᑎᓂᕐᓂ/ᐋᓐᓂᐊᖃᖅᑎᑦᑎᑕᐃᓕᒪᓂᕐᓂ ᐊᑐᖅᑕᐅᓇᓱᒃᐸᒃᑐᓂ ᐱᓕᕆᐊᒃᓴᓂᒃᓗ ᒪᓕᑦᑎᐊᕆᐊᓕᖏᓐᓂᒃᓗ ᑭᒃᑯᑐᐃᓐᓇᕐᓄᑦ ᐋᓐᓂᐊᖃᕐᓇᙱᑦᑐᓕᕆᓂᕐᒥ ᑲᓇᑕᒥ.

ᐅᓪᓗᓕᒫᖅᓯᐅᑎᒧᑦ, ᐃᖅᑲᓇᐃᔭᐃᓐᓇᕐᓂᐊᖅᑐᓄᑦ ᐃᓗᐊᖅᓴᐃᔨᓄᑦ, ᐃᖅᑲᓇᐃᔭᓕᖅᑎᑕᐅᓂᕐᒧᑦ ᐃᑲᔫᑎᑦ ᐃᓚᐅᑎᑦᑎᔪᑦ: 5,000 ᐱᒋᐊᕐᕕᖓᓄᑦ ᐅᓪᓗᒧᑦ, $5,000 18 ᑕᖅᑭᓄᑦ ᐱᔨᑦᑎᕋᖅᓯᒪᓕᖅᑎᓪᓗᒍ ᐊᒻᒪ $10,000 30 ᑕᖅᑭᓄᑦ ᐱᔨᑦᑎᕋᖅᓯᒪᓕᖅᑎᓪᓗᒍ. ᐃᓚᒃᑲᓐᓂᖏᑦ ᑮᓇᐅᔭᖅᑖᒐᒃᓴᑦ ᐃᓚᐅᑎᑦᑎᔪᑦ $9,000 ᐊᕐᕌᒍᑕᒫᖅᓯᐅᑦ ᓯᕗᓕᖅᓯᓂᖓᓄᑦ ᐃᑲᔫᑎ ᐊᒻᒪ $375 ᑕᖅᑭᑕᒫᑦ ᕿᑲᕈᑎᓄᑦ ᐃᑲᔫᑎ ᑲᑎᖦᖢᒋᑦ $4,500 ᐊᑕᐅᓯᕐᒧᑦ ᐊᕐᕌᒍᒧᑦ.

ᐃᓚᖓᓂ ᐊᑭᓕᖅᓱᖅᑕᐅᓗᓂ ᐃᖅᑲᓇᐃᔭᖅᑎᒧᑦ ᐃᒡᓗᖃᖅᑎᑕᐅᓂᖅ ᑐᒃᓯᕋᖅᑕᖅ

ᐱᒋᐊᓕᕐᓗᓂ ᑮᓇᐅᔭᓕᐊᒃᓴᖅ: $95, 882- $108,810 ᐊᕐᕌᒍᒧᑦ ᐅᑭᐅᖅᑕᖅᑐᒥᐅᑕᐅᓂᕐᒧᑦ ᐃᑲᔫᓯᐊᖅ: $15,016.00 - $34,455.00
ᒪᑐᓗᓂ ᐅᓪᓗᖅ: ᐃᓐᓄᒐᓱᖕᓂᖓᓂᒃ ᒪᒃᐲᖓᓂᐊᖅᑐᖅ

ᑐᓐᓂᖅᑯᑎᒋᓗᖑ ᖃᓄᐃᓕᐅᖅᓯᒪᔭᑎᑦ, ᓇᓗᓇᐃᕐᓗᒍ ᓇᓗᓇᐃᒃᑯᑕᖓᑕ ᓈᓴᐅᑖ 10-03-305-015LA