

CUPE LOCAL 454 APPLICATION FOR SCHOLARSHIP

The purpose of this scholarship is to assist a student to pay fees to an institute of higher learning. The basic criteria are:

- 1) A minimum 65% academic standing, and
- 2) The member, parent/guardian or grandparent be a <u>Member</u> in good standing of CUPE 454.

APPLICANT'S NA	ME:				
	(Last)	(First)	(Middle)		
ADDRESS:					
(House # & Street)		(City)	(Postal Code)		
PHONE:	DATE OF BIRTH:	S.I.N.:			
EMAIL ADDRESS	:				
FIELD OF STUDY	(e.g., Nursing, Sciences, Education	n, etc.):			
CAREER GOAL:					
INSTITUTE OF H	GHER LEARNING YOU WILL BE	ATTENDING:			
Name, address ar employment statu		arent or guardian. Please indicate	position of employment, department and		
PARENT/GUARD	IAN/GRANDPARENT:				
Employment Status (Full time/Auxiliary)		Address (if different f	Address (if different from above)		
Department		Phone Number	Phone Number		
THIS APPLICATION	ON, WITH ADDENDA, MUST BE IN	THE HANDS OF THE OFFICE	ASSISTANT BY <mark>August 09, 2024</mark> .		
	Mail to: CUPE LOCAI 360 – 6165 H Delta, B.C. V	ighway 17 A			
Date		Signature			
		S	ee Over for More Information		

There are three types of scholarships available to apply for:

- Regular Scholarships of \$500 each to first, second, third-, and fourth-year students. Open to Members or Family Members of Members of CUPE Local 454
- Trades School Scholarship of \$500. Open to Members or Family Members of Members of CUPE Local 454
- The Murray Cameron Memorial Scholarship \$500

Please refer to the attached terms of reference for definitions and details on the scholarships available to Members and Family Members of CUPE Local 454 Members. Please ensure you fully complete and sign the application form and include the required information.

This application shall be accompanied by:						
_ _ _	,					
Note : - Scholarship monies will be paid directly to the Institute of higher learning to be applied against tuition fee charges.						
PLEASE CHECK THE YEAR YOU ARE APPLYING FOR:						
_ _ _	1st Year 2nd Year 3rd Year 4th Year					
PLEASE CHECK THE SCHOLARSHIP YOU ARE APPLYING FOR:						
_ _ _	Regular Scholarship (First, second, third or fourth year of study) Trades School Murray Cameron Memorial Scholarship.					
FOR COMMITTEE USE ONLY						
Application Approv	red: Yes I	No (circle one)				
Employment Status of Parent/Grandparent/Guardian:(Full Time/Auxiliary)						
Scholarship Award	ed: 1st Year 2nd Year 3rd Year 4th Year Trades School Murray Cameron Me	morial	Data			
			Date:			