



## **Scholarship Application Form**

For CUPE 4879 Members, their Child/Spouse, or those under their Guardianship

### **Return Completed Application and all Documents to:**

CUPE 4879 Administrative Office  
Room OM2784  
TRU, Kamloops, BC V2C 0C8  
Email: [cupe4879@shaw.ca](mailto:cupe4879@shaw.ca)

**Applications can be mailed or sent electronically**

### **GENERAL INFORMATION**

Three \$1000 education awards are available. Preference will be given for one award to a student in a trade, technical, or vocational program; for the second award, preference will be given to a student in an academic program, and the third will be awarded to a student in either a trade or academic program.

### **APPLICATION REQUIREMENTS**

The applicant must:

1. Have a parent, guardian, or spouse/partner who is a member in good standing of CUPE Local 4879; or the applicant her/himself must be a member in good standing of CUPE Local 4879.
2. Submit proof of paid registration:
  - In a full-time course load (for academic and vocational students, this means enrolment in at least 3 courses; and for trades and technical students, this means enrolment in at least an 8 week full-time training course). **\*\*\*Students enrolled in a part-time course load will be considered if the number of applicants are not met for full time student applications. Please note that students enrolled in a full-time course load will be given preference.**
  - In a first year or subsequent years at a recognized post-secondary institution in a trade, technical, vocational, or academic program in Canada.
  - For the academic year in which they are applying for the scholarship.

**Note:** Preference will be given to students attending Thompson Rivers University.

3. Submit a 500-word letter (maximum length) describing your future plans, your knowledge of unions and how unions benefit your community.
4. Provide a letter of reference from an employer or from a representative of a school recently attended.
5. Submit the completed application form and additional materials requested above to the CUPE 4879 administration office by 12:00 noon of the stated deadline day in a sealed envelope marked “**CUPE 4879 EDUCATION AWARD**” on the outside with no other identifying information.

**EVALUATION CRITERIA/GENERAL GUIDELINES**

1. Qualifying applicants must comply fully with the requirements set out above.
2. Applications must be submitted to the CUPE administration office in sealed envelopes, which will be handled only by the CUPE administration assistant who will maintain the confidentiality of the applicants' identity to prevent possible conflicts of interest and ensure the fairness of the evaluation in the selection process. Or emailed to [cupe4879@shaw.ca](mailto:cupe4879@shaw.ca) to the CUPE administration assistant. **\*\*\*Students enrolled in a part-time course load will be considered if the number of applicants is not met for full time student applications. Please note that students enrolled in a full-time course load will be given preference.**
3. The Education Committee will evaluate the applications on the merit of their content only. The applicant's identity will be completely masked on all documents reviewed by the committee. The evaluation will be conducted on the basis of the adherence of the application to the requirements, and the quality and content of the essay and the reference letter—all of these elements will be given equal weight. When possible, preference will be given to making one award to a student in a trade, technical, or vocational program; and another award to a student in an academic program; the third award will be made available to a student in either a trade or an academic program.
4. When a known conflict of interest occurs with respect to a member of the Education Committee—for example, when the applicant is a dependant of a member of the Education Committee—then that member will not participate in the evaluation process. The Executive Committee will appoint a member of the Executive Committee to participate in the evaluation process in place of the Education Committee member.
5. The Education Committee will make their selection decision, record their findings, and make a written recommendation to the Executive Committee for confirmation. The identity of the selected applicants will not be revealed before the Executive Committee makes their confirmation.
6. The identity of unsuccessful applicants will remain confidential in perpetuity. However, the total number of applicants in each given school year can be revealed to the CUPE 4879 membership.

**EDUCATION AWARD TIMELINES**

1. The application deadline is at 12 noon on the third Friday in January (January 19, for 2024). Your application will be considered for the school year beginning May 1<sup>st</sup> and ending one year later on April 30.
2. **If less than three application submissions are received, the Education Committee will promote the education award availability amongst CUPE 4879 members and make every effort to garner additional applications.**
3. The successful recipients of the awards will be notified by the end of February. Our office will process and make arrangements with the successful recipients to deliver the award as soon as possible.



**1. Applicant Details**

Date of Application: \_\_\_\_\_

Title: Mr/Mrs/Ms Given Name(s): \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Insurance #: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Mailing Address (if different to Home Address): \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Union Member's Name: \_\_\_\_\_

Relationship to Member:  Self  Child/Guardian Child  Spouse/Partner

**2. Secondary School or Post Secondary Program Information**

Last grade/program completed	Name of Secondary or Post-Secondary School and Location	Date Commenced	Date Last Enrolled	Completed Yes/No	In Progress Yes/No

**3. Intended School or Institute**

Intended School or Institute: \_\_\_\_\_

Address/City: \_\_\_\_\_

Field of Study to be pursued: \_\_\_\_\_

\_\_\_\_\_

**4. Proof of Paid Registration**

Please attach proof of paid registration as outlined on page 1, Application Requirements #2.

**5. Letter/Essay – Future Plans and Knowledge of Unions in their Community**

Please attach a letter/essay (maximum 500 words) describing your future plans and your knowledge of unions in your community.

**6. Letter of Reference**

All applicants must provide a letter of reference from an employer or from a representative of a school recently attended (please attach the letter and fill out the following information). References may be contacted with permission.

<b>Reference Information</b>		
Name:		
Position:		
Employer/School Name and Address:		
Email:	Phone:	Fax:

**7. Statistical information**

Where did you hear about the scholarship?

- School or University Representative
- Website
- ECOM List
- CUPE Member
- Other: \_\_\_\_\_

**8. Application Checklist**

To expedite your application, ensure that the following checklist is complete prior to submitting your application.

- Signed original application (unsigned applications will not be processed for consideration)
- Proof of Registration as outlined on page 1, Application Requirements #2
- Letter/Essay on future plans and knowledge of unions within the community
- Letter of reference from an employer or school representative
- Submit application and all relevant documentation by the deadline of 12 noon on Jan 19, 2024.



**9. Declaration**

- I declare that the information supplied on this form is complete, true, and correct in every particular.
- I authorise CUPE 4879 to verify the details of my enrolment.
- I authorise CUPE 4879 to verify my letter of reference provided by my employer or school representative.
- I authorise the release of this application and supporting documents to the appropriate person(s) within CUPE 4879 in confidence as part of the selection process for the scholarship. I understand that my identity will be kept confidential until the successful candidate has been chosen. If I am the successful candidate, I give permission for the announcement and publication of my name to the members of CUPE 4879.

Applicant's Signature: \_\_\_\_\_

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

**For Office Use Only**

Comments:

Received by: \_\_\_\_\_

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

Checked: \_\_\_\_\_

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