



CUPE LOCAL 409 BURSARY

APPLICATION FORM

SURNAME:	GIVEN NAME(S):
HOME ADDRESS:	
POSTAL CODE:	HOME PHONE:
SCHOOL:	
SCHOOL ADDRESS:	
POSTAL CODE:	

Scholarship Contact Name: _____

Contact School Phone: _____
(usually school counsellor)

CUPE Local 409 Member's Name: _____

Relationship: _____

Intended Post-Secondary Institution: _____

Area of Study: _____

Anticipated Enrollment Date: _____ 202_____

Career Goal: _____



CUPE LOCAL 409 BURSARY/SCHOLARSHIP AWARD

INFORMATION SHEET

APPLICATION DEADLINE: FRIDAY, APRIL 5th, 2024, at 3:00 p.m.

Selection Criteria:

Up to four bursaries/scholarships, each in an amount of up to \$500.00 (total to be awarded is \$1000.00) annually to the son, daughter, sister, brother, grandson, granddaughter, or foster child of a member of CUPE Local 409 who meets the conditions as follows:

- The recipient is to be in his/her graduating year (Grade 12).
- Complete application and attach a cover letter to the Bursary Committee stating accomplishments and educational intentions.
- Should be registered in a program leading to a degree or diploma at an approved university, college, or technical institute.
- Must register for further training during a period of not later than twelve months after the bursary is awarded
- Marks must be "C" average or better (please provide a transcript).
- Financial need will be a consideration.
- Enclose letters of reference from teachers and/or community members.
- **Interview may be required.**

SEND APPLICATION TO:

Bursary Committee
CUPE Local 409.
218-800 McBride Blvd.
New Westminster, B.C.
V3L 2B8

Or email:
info@cupe409.ca