



MEMBERS' MEMORIAL SCHOLARSHIP APPLICATION

Information must be filled out by applicant. Read all instructions carefully before completing. Please type or print clearly.

<p>Personal Information</p> <p>_____</p> <p>Name</p> <p>_____</p> <p>Address City Prov. Postal Code</p> <p>Phone Number: _____</p> <p>Email: _____</p>	
<p>Who in your family is a union member? Check all that apply.</p> <p>Spouse Father Mother Grandparent</p> <p>Name: _____</p> <p>Employer: _____</p> <p>Member Since: _____</p> <p>Union Member's e-mail address: _____</p>	
<p>By June 20____, I will have completed:</p> <p>High School 1st year College/University 2nd year College/University 3rd year College/University 4th year College/University</p>	<p>In the fall of 20____, I plan to attend:</p> <p>College/University Community College Technical or Trade School</p> <p>Intended major: _____</p> <p>Name of Institute: _____</p>

Eligibility

1. Union members, spouses, dependent children and grandchildren.
2. One year continuous good standing union membership (satisfied by May 31, 20____).
3. Acceptance into an accredited college, university, community college, technical or trade school at the time of the award. **Graduate students are not eligible.**

4. Awards must be used for the school year for which it is awarded.
5. Applications must be received **by May 31st** to be considered.
 - Applicants wishing to receive confirmation of receipt of their application should provide an e-mail address.
 - The Scholarship recipient will be sent notification in July of the scholarship for the following September.

Union Membership Verification Form

This form must be completed by the applicant, verified by the union steward or local union representative, and submitted together with the application in order to qualify for the Scholarship.

Name of Scholarship Applicant: _____
(Please type or print clearly)

Applicant's e-mail: _____ Cell: _____

Relationship to Eligible Union Member:

Member's Name: _____ Relationship: _____

This form is a required part of the Scholarship application package. Member information will be confirmed by the union office.

I hereby authorize LiUNA Local 3000 to:

- Submit my application and all supporting information to the Scholarship Selection Committee.
- Use my name or picture in order to promote this award on the LiUNA Local 3000 website and within LiUNA and the Labour Community in the event that I am selected as the scholarship recipient.

SIGNATURE

DATE

THE SCHOLARSHIP RECIPIENT WILL BE CONTACTED DURING THE MONTH OF JULY AND HAVE FUNDS FORWARDED TO THEM PRIOR TO SEPTEMBER.

IMPORTANT INFORMATION

When submitting your application, include a 500-1000 word essay explaining “**Personal Examples of Leadership**” and your signed union verification form. Applications without this information will not be considered.

Applications and attachments must be received via email to education@liuna3000.ca no later than May 31st. Please note that no extensions will be given. Late or incomplete applications will not be considered by the Selection Committee.

CERTIFICATION

I, the undersigned, certify that all of the information I have included in and with my application is true. I understand that if I am selected for an award, I may be required to submit further proof of my union membership or my relationship to a union member and of my acceptance to or enrollment in an accredited college, university, community college, technical or trade school. Further, I understand that official verification may be required of my attained grades. I agree that if I am selected for an award, my name, photograph, and/or essay may be used for publicity purposes with no additional compensation by the sponsors of this scholarship program. I also certify that I have read and understand the above information.

SIGNATURE

DATE

Check List:

Have you...

- Completed Membership Verification Form
- Completed your application
- Included a 500-1000 word essay explaining “Personal Examples of Leadership”
- Signed the information release clause (above)