



**Local 4848**  
CUPE / SCFP  
Paramedics & Dispatchers

**Bursary**

CUPE LOCAL 4848 is pleased to offer four (4) bursaries on behalf of CUPE Local 4848 in the amount of \$500 to a full-time student who will be attending post-secondary education. The application **must be completed in full** to be considered. Incomplete applications will not be considered.

Applicant must be a member in good standing, son, daughter, stepson, stepdaughter, niece, nephew, spouse or guardian of a member in good standing or of a retired or deceased member.

The basis of this bursary shall be the applicant's financial needs, education achievements and current and ongoing volunteerism/social activism in his/her community. Please complete the form on both sides.

Name of Applicant in full: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Telephone Number of Applicant: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's Date of Birth: \_\_\_\_\_  
MONTH / DAY / YEAR

- |                                 |                 |                  |              |
|---------------------------------|-----------------|------------------|--------------|
| Status of Applicant: (a) Member | (c) Daughter    | (e) Stepson      | (g) Guardian |
| (b) Son                         | (d) Spouse      | (f) Stepdaughter | (h) Niece    |
| (i) Nephew                      | (j) Other _____ |                  |              |

Name of Associated Member: \_\_\_\_\_

**The following MUST be completed by an Executive Member/Station VP of the local union of which you, your parent, guardian or spouse is a member in good standing or of a retired or deceased member.**

I, \_\_\_\_\_, Executive Member/Station VP of CUPE Local 4848 do solemnly declare that \_\_\_\_\_ is a member, parent, guardian, spouse or other of CUPE Local 4848.

Date \_\_\_\_\_ Signature of Executive Member/Station VP \_\_\_\_\_



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**Please note:** A copy of your **transcript** with the average calculated must accompany all applications if you are new to university/college **or** a returning student.

Name and location of school you are planning to attend: \_\_\_\_\_

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Tuition: \_\_\_\_\_

Calculated Average/ GPA: \_\_\_\_\_

Title of Course/Program you are accepted to take: \_\_\_\_\_

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If you have received any bursaries/scholarships for this year, please outline the name/amount:

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If you have a summer job this year, please give details: \_\_\_\_\_

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**PLEASE NOTE: You must include an outline of your involvement in unpaid volunteer activities by submitting a resume and cover letter describing your volunteerism/social activism, the length of service and time commitment.**

**Also please include a reference letter completed by an individual who is familiar with your volunteer activities with full contact information but who is not related.**

Date: \_\_\_\_\_ Signature of applicant: \_\_\_\_\_

The successful Applicant will be notified immediately following the decision of the Executive CUPE Local 4848. Proof of registration and attending by the successful applicant must be submitted to CUPE Local 4848 in order to receive this bursary.

**APPLICATIONS must be received by September 1<sup>st</sup>. Applications can be sent to [jastle@bellaliant.net](mailto:jastle@bellaliant.net).**