

Al Scott Education Fund

Eligibility Criteria:

1. To upgrade your nursing skills within our Collective Bargaining Unit
2. Must be a Local 045 member
3. Must have taken Intro to the Union

Eligible Programs for Members:

1. Single events (workshops, conferences, etc.) - registration fees ONLY or
2. Diploma education programs and specialty certification programs- registration, tuition and/or exam fees ONLY

The fund will not provide resources for additional costs such as books, travel, meals or lodging.

Application Process:

1. **All avenues of other funding, through professional grants and bursaries, must be exhausted prior to applying to the Local.**
2. Applications must be made using the approved form and be legible
3. Send the original, complete application form along with supporting documents to a member of the Local 045 Executive.
4. Include photocopied receipts and proof of completion with your application form
5. Incomplete or late applications will not be considered
6. Course/event/workshop/program must be completed and applied for in the same calendar year.
7. Deadline for submission is December 31st of each year. Application will be reviewed at the following Finance and Policy meeting.
8. The Finance Committee will review all eligible applications and award the funds based on the completeness and merits of the application.
9. Maximum bursary per member per year not to exceed \$499.00.
10. Submission of an application does not guarantee a bursary



AL SCOTT EDUCATION FUND APPLICATION FORM

Name:	Home Address:
Phone #:	Email:
Intro to the Union course date:	

Employment setting:

Job Title:	Location/Site:
Program/Unit:	Status: (required) <ul style="list-style-type: none"> <input type="radio"/> Full time <input type="radio"/> Part Time <input type="radio"/> Casual

I am applying to the Al Scott Education Fund to help support the following program/activity. Must have occurred within the same calendar year.

The fund will not provide resources for additional costs such as book, travel, meals or lodging.

Name of program/activity: _____

Location of program/activity: _____

Date of program/activity: _____

Completion date of program/activity: _____

I have attached the following documents:

- ☐ Description of course or event including dates (required)
- ☐ Cost of registration, tuition or exam (required)
- ☐ Certificate or proof of program/activity completion (required)

On a separate piece of paper indicate the following in essay form: (required)

- 1 How did you hear of this fund?
- 2 What is your reason for requesting funding?
- 3 How does taking this course/program apply to your job now?