

PART-TIME STUDENTS

ALBERTA UNION OF PROVINCIAL EMPLOYEES EDUCATION ASSISTANCE



AUPE maintains a Members' Education Assistance Fund, which is the responsibility of the Education sub-committee of the Members' Benefits Committee. The sub-committee determines the amount of bursary money that will be awarded each year based on the interest generated by the capital in the fund. The part-time Education Assistance Bursary is a pilot project for 2019/2020.

Criteria:

There are two application periods

- Applications will be accepted after **May 10** and must be received at AUPE Edmonton HQ by **the 2nd Thursday of July**. Applications will also be accepted after **September 10** and must be received at AUPE Edmonton HQ by **the 2nd Thursday of November**.
- **Incomplete applications will be disqualified.**
- Program of study – identify program, length of program.
- Confirmation of acceptance with class schedule **MUST be attached.**
- Must be attending **part-time studies** as defined by Institution.
- Bursaries will be considered for accredited Alberta educational institutions only.
- Bursaries will be awarded based on financial need of the Member. Consideration of financial need will include all sources of family income.
- Members are eligible up to four (4) successful applications lifetime.
- Payments will be sent directly to the educational institutions.
- Students attending full time studies taking spring and summer courses do not qualify for Part-Time bursaries.
- 1st time applicants may be given preference.
- Courses ending prior to the deadline for each term will not be accepted.

Notes:

- Application forms are available at any AUPE office or on the AUPE website.
- Social Insurance Number must be provided (for tax purposes).
- All applicants will be advised in writing of the results.
- Please **DO NOT phone** AUPE to request the sub-committee's decision on your Bursary application.
- AUPE will not provide funds for any expenses related to this program other than tuition.

DEADLINES FOR APPLICATION: 2nd Thursday of July and the 2nd Thursday of November.

The completed **original** application will be accepted from **May 10 to the 2nd Thursday of July** and **September 10 to the 2nd Thursday of November** for studies commencing after the submission deadline. **Please mail the original application and attachments to the Edmonton AUPE Headquarters office, 10451 - 170 Street, Edmonton, Alberta, T5P 4S7.**

Eligibility:

- Members of AUPE with two consecutive years service at the date of application.
- Eligible Members must be at least 25 years of age.
- Must be towards a degree, diploma or certificate program.
- Consideration will be made for a past Member who enrolls part-time in an educational institution within the first twelve (12) months of job elimination through layoff or abolishment.

BURSARY:

Administered through the Members' Benefits Education Sub-Committee

Bursary **(based on financial need)**

Priority will be given to students who are attending their first year of studies.

PLEASE PRINT: An incomplete form will be disqualified. All sections MUST BE completed and signed by student/member. Please use blue or black ink only.

PERSONAL DATA	Applicant's Surname		Given Name and Initials		Social Insurance No.				Date of Birth (DD/MM/YYYY)				
	Address					City/Town				Postal Code			
	Cell Phone No.		Home Phone No.		Email				Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow(er)		<input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common-Law		
	Name of Spouse/Partner			Spouse/Partner's Occupation			<input type="checkbox"/> FT <input type="checkbox"/> Casual <input type="checkbox"/> PT <input type="checkbox"/> FTE		No. of Dependents		All Dependent(s) Age(s)		
	Are you an AUPE Member? <input type="checkbox"/> Yes <input type="checkbox"/> No		Or the Dependent of a Member? <input type="checkbox"/> Yes <input type="checkbox"/> No		Relationship to Member		<input type="checkbox"/> Yes <input type="checkbox"/> No		Have you received an AUPE Education Bursary before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Year(s)		
	Will you receive any other educational funding? <input type="checkbox"/> Yes <input type="checkbox"/> No (ie. Bursaries, Employer Tuition Supported, Scholarship) Amount												
	Occupation					<input type="checkbox"/> FT <input type="checkbox"/> Casual <input type="checkbox"/> PT <input type="checkbox"/> FTE		Employer					
	Location				AUPE Member No.		Local/Chapter			Date of Membership (DD/MM/YYYY)			
	Will you receive any other educational funding? <input type="checkbox"/> Yes <input type="checkbox"/> No (ie. Bursaries, Employer Tuition Supported, Scholarship, RESP) Amount												

In accordance with CRA regulations, assistance provided to applicant (in excess of \$500) is deemed a taxable benefit and AUPE is required to issue a T4a.

APPLICANT'S EDUCATION	Period of study for which assistance is being requested:		From:		To:	
	Institution				*Program and Length of Program	
	Location		No. of Years Completed of Current Program		Student ID No.	
	Post Secondary Education Achieved				Dates	

***Attach confirmation of acceptance including class schedule**

Application No. (office use only)

Income for Applicant, Member and Spouse (NOTE: In cases of Divorce/Separation both households must submit financial information.)

FINANCIAL INFORMATION	APPLICANT			
		Applicant	Spouse/Partner	Total
	Net income from previous year's income tax return	\$	\$	\$
	Estimate of income for this tax year	\$	\$	\$
All Other income	\$	\$	\$	

4	Tell us about yourself
	Provide in two or more paragraphs your financial need, special circumstances, career goals and any information relevant to your application that may assist the committee. Your written comments are very important to the evaluation of your application.

