

CUPE LOCAL 703 AWARD

Name of Award: _____

Name: _____ Birthdate: _____

Address: _____

Phone Number: _____

1. Secondary School attended from _____ to _____

2. Are you presently living at home? _____

3. Number of siblings _____ their ages _____

4. Mother's name: _____ Father's name: _____

Mother's occupation: _____ Father's occupation: _____

Parent's CUPE work site: _____

Parent's address if different than above . _____

5. Are you presently working? _____ Number of hours a week _____

Do you have a summer job lined up? _____ Full or Part time _____

6. Future Plans:

Name of Post-Secondary Institute

Areas of Study

1. _____

2. _____

3. _____

7. Estimated future school expenses:

Tuitions/Books \$ _____ Room & Board \$ _____ Transportation \$ _____

For what percentage of these expenses are you responsible? _____

8. Have you been awarded any other scholarships or bursaries? _____

Do you have access to other financial support? (i.e. trust funds) _____

6. Are there any specific circumstances that the award selection committee should be made aware of?
If so, please use the space provided or attach a separate sheet._____

Additional information in Scholarship, Bursary Booklet.

I certify that the information contained in this application is correct.

Student Signature