

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 (for Type 1) that will be awarded each year based on the interest generated by the capital in the fund.

## Criteria:

- Applications will be accepted after **May 1st** and must be received at AUPE Edmonton by **June 30th**.
- Only **Original** applications completed in full will be accepted.
- Incomplete applications will be disqualified.
- Program of study – identify program, length of program, full time or part time studies. Confirmation of acceptance **MUST be attached**.

## Note:

- The Essays are sent to independent reviewer(s) for grading
- Social Insurance Number must be provided (for tax purposes)
- The Education Committee meets in July to review the applications
- Please **DO NOT phone** AUPE to request the Committee's decision on your Scholarship/Bursary application.
- All applicants will be advised in writing by mid August of the results.

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## Type 1: Administered through AUPE Headquarters Edmonton

Bursary (based on financial need)

Funds are granted through the Members' Benefits Education Sub Committee.

### Eligibility:

Based on financial need, available for post secondary Education. Members in good standing of AUPE **with two consecutive years service as of June 30 of current year** are eligible, and/or their spouse, and/or their financial dependents; and/or dependents of retired or deceased members. All dependents must be under the age of 25 years. Consideration will be made for a past member who enrolls full-time in an educational institution within the first year of job elimination.

### How to Apply:

Application forms are available at any AUPE office or on the AUPE website

Applications must be for full-time studies (*as defined by the Educational Institute*).

Please attach confirmation identifying full-time study.

### Deadline for Application: June 30

The completed **original** application will **only** be accepted **from** **May 1 - June 30** each year for studies commencing after the submission deadline. Please mail the original application and attachments to the Edmonton AUPE office.

*AUPE Local donations will be distributed as per the Type 1 Bursary guidelines above.*

## **Type 2:**

### **\$2,500 Brent Gawne Memorial Scholarship**

This scholarship was set up at the 2004 Annual AUPE Convention to raise awareness of privatization of public services. *The Essay topic will be chosen annually by the AUPE Executive Committee.*

#### **Eligibility:**

A post secondary student enrolled in full-time studies within the Province of Alberta.

#### **2009 Essay Topic:**

Submission of a **2,000** or more word essay on the topic of: **Is the health of a Province measured by its wealth, or is the wealth of a Province measured by its health?**

The essay must be submitted in formal Essay format (ie. Title page, footnotes, etc.)

Attach computer printout reflecting Essay word count.

The essay must be on a separate paper attached to the Education Assistance Program completed application form. Entries will be judged by qualified adjudicators.

Please attach confirmation identifying full-time study.

#### **Deadline for Application: June 30**

The completed **original** application will **only** be accepted **from May 1 - June 30** each year for studies commencing after the submission deadline. Please mail the original application and attachments to the Edmonton AUPE office.

## **Type 3:**

### **Administered By Various Educational Institutions throughout Alberta - Bursaries**

#### **Eligibility:**

AUPE has partnered with a number of Educational Institutions throughout the Province to administer bursary programs on behalf of AUPE. Please refer to AUPE website for Institutions.

#### **How to Apply:**

Application forms are available at the Educational Institutions. Request the AUPE Bursary Application form. Completed applications are to be returned to institution.

#### **Deadline for Application:**

Deadlines vary by Institution. Please confirm the deadline date when requesting an application.



**<http://www.aupe.org>**

To access Education information click through to  
[about\\_aupe/other\\_services/Bursaries.php](http://www.aupe.org/about_aupe/other_services/Bursaries.php)



# The Alberta Union of Provincial Employees Education Assistance Program

**Please print  
An incomplete form  
will be disqualified  
Section 6 on the reverse  
MUST BE completed and  
signed by student**

<b>1</b> <b>Personal data</b>	Student's surname		Given name and initials		Social insurance #		Birthdate D/M/Y	
	Address				City/Town		Postal code	
	Business Phone #		Home Phone #		EMail		Marital status Single <input type="checkbox"/> Married <input type="checkbox"/> Widow(er) <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common-law <input type="checkbox"/>	
	Name of spouse			Spouse's Occupation		# of dependents		Dependent age(s)
	Are you an AUPE member? <input type="checkbox"/> or the dependent of a member? <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/>				Have you applied for an AUPE Education Bursary before? No <input type="checkbox"/> Yes <input type="checkbox"/> Yr <input type="text"/>			
	Period of study for which assistance is being requested: From To			Institution		Location		Program and Length of Program *
	Will you be relocating from the above city/town? No <input type="checkbox"/> Yes <input type="checkbox"/>			Full time Studies No <input type="checkbox"/> Yes <input type="checkbox"/>		Part time Studies No <input type="checkbox"/> Yes <input type="checkbox"/>		

\*attach confirmation of acceptance and whether full or part time studies

**If the student is a MEMBER, complete the following:**

<b>2a</b>	Occupation			Employer		
	Location		AUPE member #		Local/Chapter	Date you became a member D/M/Y

**If the student is a DEPENDENT of a MEMBER, the following is to be completed by the MEMBER:**

<b>2b</b> <b>Membership history</b>	Member's surname		Given name and initials		AUPE member #		Local/Chapter	
	Address				City/Town		Postal code	
	Business Phone #		Home Phone #		Occupation		# Dependents Ages	
	Employer			Location			Date you became a member D/M/Y	

**Student's Education**

<b>3</b>	Post secondary education achieved		Dates		# of years completed	
	Degree(s)/Diploma(s) achieved					

**Complete the following information as a student and/or member:**

<b>4</b> <b>Financial information</b>	<b>Student</b>		
	Net income from previous year's income tax return		Total
	Estimate of income for this year		\$
	All Other income (i.e. Business, farm, investments, child support, rental property etc.)		\$
<b>Parents of dependent student</b>			
Net income from previous year's income tax return		Total	
Estimate of income for this year		\$	
All Other income (i.e. Business, farm, investments, child support, rental property etc.)		\$	
<b>I/We certify the above information to be true and complete.</b>			
Signature of student _____		Signature of member parent _____	Date _____

