

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 (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 1** and must be received at AUPE Edmonton HQ by **4:00 pm on Friday, July 15, 2022**.
- **Incomplete applications will be disqualified.**
- Program of study – identify program, length of program.
- Confirmation of acceptance with class schedule **MUST be attached**. (If not available submit application by deadline without class schedule).
- Must be attending **full-time studies** as defined by Institution.
- Must be enrolled for academic year September to August following application deadline.
- 1st time applicants may be given preference.

Notes:

- Application forms are available at any AUPE office or on the AUPE website.
- The Essays are sent to independent adjudicator(s) for grading.
- **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 Scholarship/Bursary application.
- AUPE will not provide funds for any expenses related to this program other than tuition.

DEADLINE FOR APPLICATION: July 15, 2022

The completed **original** application will **only** be accepted from **May 1 to July 15, 2022** each year for studies commencing after the submission deadline. **Please email applications and attachments to scholarships@aupe.org or fax to 780-930-3344.**

Eligibility: Members of AUPE **with two consecutive years service as of the application deadline date** are eligible, and/or their spouse, and/or their financial dependents; and/or dependents of retired or deceased members for a period of one year. Eligible dependents must be under the age of 25 years as of the application deadline date. Consideration will be made for a past member who enrolls full-time in an educational institution within the first year of job elimination.

This bursary is awarded based on financial need, available for full-time post secondary Education.

Note: Inactive members (applicant and/or parent of applicant) must provide an explanation. (eg. leave of absence, casual etc.)

BURSARY TYPE 1:

Administered through the Members' Benefits Education Sub-Committee Bursary (based on financial need)

Applicants applying as a dependent of an AUPE member, **MUST** provide **ALL** financial information of **applicant, member** and **spouse/partner** in Section 5 of application.

Note: In cases of divorce/separation both households must submit financial information.

Priority will be given to students who have NOT received the Bursary award previously.

BURSARY TYPE 2:

Two (2) \$2,500 Brent Gawne Memorial Scholarships

A: Post Secondary This scholarship was set up at the 2004 Annual AUPE Convention to raise awareness of privatization of public services.

B: High school In February 2017, the Provincial Executive upon request from the Members' Benefits Committee approved a second scholarship for \$2,500. The Committee felt that it was needed to balance competition between high school and post-secondary students.

Essay Topic: *Please see page 2 of this form*

Essay Format: Your essay must be submitted in formal format (i.e. title page, footnotes, citations, double spaced, and a complete bibliography as evidence of the research you have compiled).

Attach confirmation identifying full-time study, including class schedule. Applicant must sign consent for essay to be published on AUPE's website or publications. All essays are reviewed by an independent adjudicator.

2022 Brent Gawne Memorial Scholarships (Type 2) Essay Topic:

Challenges Facing Alberta's Public Sector

In the last few years, Alberta's public sector has borne the brunt of cutbacks, privatization and contracting out, and there is every indication that these will continue for the next year or two. You are asked to examine some of the issues that are raised; e.g., "What do we mean by 'public sector?'" Where have (i) cutbacks, (ii) privatization, and (ii) contracting-out taken place in Alberta in the last while? What justification has been given for such cases? What have been their effects? Identify areas of our society that are best served by a strong public sector, and those that might be legitimately left to the private sector? Explain your choices.

Please address this broad area of public debate by answering as many of these questions as possible in a well-structured essay of at least 2,000 words. Your essay will be judged on evidence of research (footnotes, etc.), style, clarity, how well you support or substantiate your choices and positions.



To access Education information click through to
www.aupe.org/my-aupe/benefits/scholarships/

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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.

1	Please indicate which bursary/scholarship you are applying for		If you qualify, you may apply for both Type 1 and Type 2 on the same application form.
	<input type="checkbox"/> TYPE 1 - AUPE Bursary (number to be determined by committee)	<input type="checkbox"/> TYPE 2 - \$2,500 Brent Gawne Memorial Scholarship (Essay and word count for essay must be attached)	
		<input type="checkbox"/> Post Secondary Student	<input type="checkbox"/> High School Student

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 style="width: 50px;" type="text"/>	Have you received an AUPE Education Bursary before? <input type="checkbox"/> Yes <input type="checkbox"/> No Year(s) <input style="width: 50px;" type="text"/>
	Will you be relocating from the above city/town? <input type="checkbox"/> Yes <input type="checkbox"/> No		Will you receive any other educational funding? <input type="checkbox"/> Yes <input type="checkbox"/> No (ie. Bursaries, Employer Tuition Supported, Scholarship, RESP) Amount <input style="width: 100px;" type="text"/>	

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.

If the applicant is a MEMBER, complete the following

3	Occupation <input type="checkbox"/> FT <input type="checkbox"/> Casual <input type="checkbox"/> PT <input type="checkbox"/> FTE	Employer
	Location	AUPE Member No. <input style="width: 50px;" type="text"/>
	No. of Dependents	Local/Chapter <input style="width: 50px;" type="text"/> Date of Membership (DD/MM/YYYY) <input style="width: 100px;" type="text"/>
	All Dependent(s) Age(s)	

If the applicant is a DEPENDENT of a MEMBER, the following is to be completed by the MEMBER

MEMBERSHIP HISTORY	Member's Surname	Given Name and Initials	AUPE Member No.	Local/Chapter	
	Address		City/Town	Postal Code	
	Business Phone No.	Home Phone No.	Occupation <input type="checkbox"/> FT <input type="checkbox"/> Casual <input type="checkbox"/> PT <input type="checkbox"/> FTE	No. of Dependents (including applicant)	All Dependent(s) Age(s) (including applicant)
	Employer	Location		Date of Membership (DD/MM/YYYY) <input style="width: 100px;" type="text"/>	
	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 <i>Please describe employment</i>		 <input type="checkbox"/> FT <input type="checkbox"/> Casual <input type="checkbox"/> PT <input type="checkbox"/> FTE	

4	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 (explain)	\$	\$	\$
	PARENTS OF DEPENDENT APPLICANT	Member	Spouse/Partner	Total	
		Net income from previous year's income tax return	\$	\$	\$
		Estimate of income for this tax year	\$	\$	\$
		All Other income (explain)	\$	\$	\$
	DIVORCED/SEPARATED PARENTS OF DEPENDENT APPLICANT	Member	Spouse/Partner	Total	
		Net income from previous year's income tax return	\$	\$	\$
		Estimate of income for this tax year	\$	\$	\$
		All Other income (explain)	\$	\$	\$

6 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.**

CHECKLIST (Note: If any of the noted items are missing your application may NOT be considered.)

- Use the current year's AUPE application form
- Section 6 completed
- Attach copy of full-time acceptance
- Attach copy of class schedule
- If applicable, Type 2 - Essay (in acceptable essay format with word count attached)
- Signature of applicant and member
- Submit your completed application with supporting documents no later than 4:00 pm on July 15, 2022

I/We certify the above information to be true and complete.

Signature of Applicant	<input type="text"/>
Signature of Member/Parent	<input type="text"/>
Applicant's essay publication consent	<input type="text"/>
Date	<input type="text"/>

Attention: Members' Education Assistance Program
 The Alberta Union of Provincial Employees
 10025 - 182 ST NW, Edmonton, AB T5S 0P7
Fax : 780-930-3344 • email: scholarships@aupe.org

**Applications will be accepted
 from May 1 to July 15, 2022**