

## **CUPE Local 3906 UNIT 2 LIMITED TRAINING FUND AWARD 2021 APPLICATION FORM**

**INSTRUCTIONS:** Please complete **Parts 1, 2, and 3**. Please type or print clearly and sign in the “signature” box. Please submit completed forms **via email to [staff@cupe3906.org](mailto:staff@cupe3906.org) no later August 31, 2021.**

### **Part 1: Member Information**

<b>NAME:</b>	<b>EMPLOYEE NUMBER:</b>
<b>EMAIL ADDRESS:</b>	<b>DEPARTMENT(S) OF EMPLOYMENT AS A CUPE 3906 UNIT 2 MEMBER:</b>
<b>MAILING ADDRESS:</b>	

I understand that my cheque will be mailed to the address above.

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### **Part 2: Eligibility Requirements (you MUST submit a copy of your registration email or certificate of completion)**

<b>Name of Training Completed:</b>	<b>Date of Completion:</b>

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### **Part 3: Member Signature**

I submit this claim as a member in good standing with CUPE Local 3906. I am aware that any false information given will result in my immediate disqualification from this benefit, and could result in further legal action.

<b>Signature of Applicant:</b>	<b>Date:</b>
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