



# TEAMSTERS CANADA SCHOLARSHIP

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Application for Teamsters Canada Scholarship for the 2016-2017 Academic Year  
Application Deadline: September 30<sup>th</sup>, 2016

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## APPLICATION PROCEDURE (USE AS A CHECKLIST)

1. Complete questions 1 to 8;
2. Attach your membership verification form signed by the Secretary-Treasurer (**VERY IMPORTANT**);
3. The section marked “Academic Record” must be completed by the Applicant’s guidance counselor (or equivalent school official);
4. Attach your 250 words essay answering the following question: *What are the benefits of being a Teamster member?*;
5. If time or geographic constraints will not allow you to provide your information to Teamsters Canada within the delay, you can either fax them to 450-681-2244 or email them to info@teamsters.ca.

**Applications without a membership verification will not be processed.**

**Applications not postmarked (or emailed) by the deadline of September 30<sup>th</sup>, 2016 will not be processed.**

**PLEASE COMPLETE THE FOLLOWING:**

**1. NAME**

Last (Do not include Jr or II, etc.) \_\_\_\_\_

First \_\_\_\_\_ Middle initial \_\_\_\_\_

**2. ADDRESS (if P.O. Box, include physical street address)**

No and Street \_\_\_\_\_

City and Province \_\_\_\_\_

Postal Code \_\_\_\_\_

**3. CONTACT INFORMATION**

Home phone no. \_\_\_\_\_ Alternate phone no. \_\_\_\_\_

Email address \_\_\_\_\_

**4. DATE OF BIRTH**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month Day Year

**5. Full names of the accredited school, CEGEP, college or university to which you have applied or plan to attend or attend.**

\_\_\_\_\_  
Name City and Province

**6. Teamsters Affiliation (local union, conference or division)** \_\_\_\_\_

**7- Employer's information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City/Province Postal code

\_\_\_\_\_  
Occupation How many hours a week (average)

\_\_\_\_\_  
Union involvement

**8. Estimated financial need**

List the total anticipated amount you will need for the year. Include the cost of tuition plus expenses of room and board, transportation and books. \$\_\_\_\_\_

Number of dependents. \_\_\_\_\_

List the financial aid programs in which you will participate or have applied for, such as partial scholarships provided by the school, an alumni association, Government or other group.

Source: \_\_\_\_\_ minus \$\_\_\_\_\_

Source: \_\_\_\_\_ minus \$\_\_\_\_\_

List of funds you will receive from any other source, such as parental assistance, employment or gift.

Source: \_\_\_\_\_ minus \$\_\_\_\_\_

I have been an active Teamsters Canada member for at least 12 consecutive months prior to applying and I have paid my union dues for the 12 months prior to applying;

I am not an officer of Teamsters Canada or of any of its affiliates or subordinate bodies, and neither are my parents, spouse or children;

I am not an employee of Teamsters Canada or of any of its affiliates or subordinate bodies, and neither are my parents, spouse or children.

I, \_\_\_\_\_, am enrolled in a recognized regular or vocational training program, or;

I, \_\_\_\_\_, have followed a course in a recognized regular or vocational training program in the last year;

**Please provide any additional information that you believe would be helpful to the Scholarship Committee in assessing your personal or financial need.**

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**Please attach an essay of approximately 250 words answering the following question: *What are the benefits of being a Canadian Teamster member?***

I certify, to the best of my knowledge, that this information is accurate and complete.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



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## ACADEMIC RECORD – YEAR 2016-2017

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**Must be completed by the applicant's school official**

Applicant's Name: \_\_\_\_\_  
Last First Middle

### I. ACADEMIC INFORMATION

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone no.: \_\_\_\_\_

I confirm that the applicant is registered for the following program with our school  
\_\_\_\_\_ for the  
session or school year starting \_\_\_\_\_.

Registration fees of \_\_\_\_\_ have been  or will be  paid.

(Please attach copy of invoice and/or proof of payment)

**STOP!**

**THE FOLLOWING MUST BE COMPLETED BY  
YOUR LOCAL UNION, CONFERENCE OR  
DIVISION'S SECRETARY TREASURER**

**LOCAL UNION, CONFERENCE OR DIVISION:** \_\_\_\_\_

**SECRETARY-TREASURER'S MEMBERSHIP VERIFICATION**

1. I hereby certify that the above-named person is not an elected officer or employee of this Local Union and is a member in "good standing" as defined in Article X, Section 5 of the International Constitution, and has paid his dues for at least the last twelve months.

\_\_\_\_\_  
Secretary-Treasurer

\_\_\_\_\_  
Date

**Please forward your application and Academic Record Form to:**

**Teamsters Canada  
Scholarship Fund  
804 - 2540, Daniel-Johnson  
Laval, Québec H7T 2S3**

**Applications not postmarked or emailed by the application deadline of  
September 30<sup>th</sup>, 2016 will not be processed by the Scholarship Fund.**

Scholarship recipients are selected on the basis of union involvement, personal qualifications, geographic location and financial need by the Scholarship Selection Committee. We consider all applicants without regard to race, religion, gender, disability or any other legally protected status.