



WORKING TOGETHER FOR SASKATCHEWAN

BURSARY & SCHOLARSHIP APPLICATION

LATE OR INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL BE REJECTED DEADLINE: AUGUST 15, 2018

MAIL TO:

SGEU Education Department 1011 Devonshire Dr. N Regina, SK S4X 2X4

EMAIL TO:

SGEUBursary@sgeu.org

FAX TO:

(306) 565-2240 Attn: SGEU Education Department

Check one: [ ] Full-time Studies Application (3 or more courses per semester 2018/2019) [ ] Part-time Studies Application (courses taken in 2018 or 1st semester 2019)

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Mailing address while attending school: [ ] same as above, or

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail \_\_\_\_\_

I am submitting my application for an SGEU Bursary and declare that the information given and statements made herein are true. I hereby authorize SGEU to contact the post-secondary institution to verify enrolment information.

Signature \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_

To be eligible you must:

- Send your application in MS word format or pdf, and
• Be registered as a student in a publicly funded educational institution, and
• Be a member in good standing of SGEU who has held membership for at least one year, or
• Be the spouse of a member in good standing of SGEU who has held membership for at least one year, or
• Be the dependant of a current, retired, or deceased member of SGEU who held membership for at least one year, AND you must meet the following requirements:

NOTE TO APPLICANTS:

Please do not include identifying information on pages 3 to 6 of the application.

1. be a family member by blood, marriage, adoption, common-law relationship, or equivalent circumstance, **and**
2. be supported financially by the SGEU member or their surviving spouse or estate (receive room, board and other significant living expenses as opposed to occasional gifts of cash), **and**
3. live in Canada with the SGEU member, or their surviving spouse, or guardian as determined by their estate, unless living elsewhere in order to attend an educational institution

**The rest of this page must be  
left blank when  
Completing the application.**



Office Use Only
Applicant No. _____
<input type="checkbox"/> Member <input type="checkbox"/> Spouse <input type="checkbox"/> Dep. <input type="checkbox"/> FT <input type="checkbox"/> PT
Member since: _____

**Which scholarship would you like to be considered for?**

If applying for both Best Essay and Financial Need you will need two separate essays for each scholarship you are applying for, and have two different topics from Section V.

- Best essay  
If you choose to submit your application for Best Essay please note SGEU reserves the right to use all or any part of your essay in other SGEU materials.
- Financial need

**Check the one that describes you:**

- I am an SGEU member
- I am the spouse of an SGEU member (fill in the three blanks below)
- I am a dependant of an SGEU member (fill in the three blanks below)

SGEU member's name \_\_\_\_\_

SGEU member's work location \_\_\_\_\_

SGEU member's sector name and local number \_\_\_\_\_

**I am a member of the following equity-seeking group(s):**

Check all that apply:

- Aboriginal
- Disabled
- LGBTQ2
- Female
- Visible Minority

**NOTE TO APPLICANTS:**

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**Note:**

For best essay fill in sections IV and V.

For financial need please fill in sections I, II, III, IV and V.

**I. Financial Information – Please complete A, B, and C.**

**A.** What was your taxable income for 2017?

<input type="checkbox"/> \$0 - \$9,999	<input type="checkbox"/> \$60,000 - \$69,999
<input type="checkbox"/> \$10,000 – \$19,999	<input type="checkbox"/> \$70,000 - \$79,999
<input type="checkbox"/> \$20,000 - \$29,999	<input type="checkbox"/> \$80,000 - \$89,999
<input type="checkbox"/> \$30,000 - \$39,999	<input type="checkbox"/> \$90,000 - \$99,999
<input type="checkbox"/> \$40,000 – \$49,999	<input type="checkbox"/> \$100,000 plus
<input type="checkbox"/> \$50,000 - \$59,999	

**B.** What was your spouse's taxable income for 2017? (Spouse includes partner or common-law spouse.)

<input type="checkbox"/> Not applicable	<input type="checkbox"/> \$60,000 - \$69,999
<input type="checkbox"/> \$0 - \$9,999	<input type="checkbox"/> \$70,000 - \$79,999
<input type="checkbox"/> \$10,000 – \$19,999	<input type="checkbox"/> \$80,000 - \$89,999
<input type="checkbox"/> \$20,000 - \$29,999	<input type="checkbox"/> \$90,000 - \$99,999
<input type="checkbox"/> \$30,000 - \$39,999	<input type="checkbox"/> \$100,000 plus
<input type="checkbox"/> \$40,000 – \$49,999	
<input type="checkbox"/> \$50,000 - \$59,999	

**C** What was your parents' or guardians' combined taxable income for 2017?

<input type="checkbox"/> Not applicable	<input type="checkbox"/> \$60,000 - \$69,999
<input type="checkbox"/> \$0 - \$9,999	<input type="checkbox"/> \$70,000 - \$79,999
<input type="checkbox"/> \$10,000 – \$19,999	<input type="checkbox"/> \$80,000 - \$89,999
<input type="checkbox"/> \$20,000 - \$29,999	<input type="checkbox"/> \$90,000 - \$99,999
<input type="checkbox"/> \$30,000 - \$39,999	<input type="checkbox"/> \$100,000 plus
<input type="checkbox"/> \$40,000 – \$49,999	
<input type="checkbox"/> \$50,000 - \$59,999	

**NOTE TO APPLICANTS:**

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## II. Number of Dependants

Check one only:

- I have no dependants.
- I have one dependant.
- I have two dependants.
- I have three or more dependants.

## III. Financial Barriers

Check all that apply to you:

- I have to relocate or commute in order to attend my educational institution.
- I am challenged with a chronic health problem.
- I am a northern resident (living north of 54<sup>th</sup> parallel).
- I pay child support.
- I am the custodial single parent.
- I have a dependant who is attending post-secondary education.
- My parents/guardians are also supporting another dependant attending post-secondary education (dependant applicants only).
- I have a physically/mentally challenged dependant.
- I have a physically/mentally challenged spouse.
- I am the primary care provider for an elderly parent or relative.

**NOTE TO APPLICANTS:**

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List any additional financial factors or circumstances that you believe may apply:

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#### IV. Educational Institution

Name of educational institution:

\_\_\_\_\_

City and province of educational institution:

\_\_\_\_\_

Is the educational institution public or private?  Public  Private

Certificate/Diploma/Degree \_\_\_\_\_

Student I.D. number \_\_\_\_\_

#### V. Essay

**NOTE TO APPLICANTS:**

Please do not include identifying information on pages 3 to 6 of the application.

**ALL** applications must submit an essay with your application that complies with the following:

**If applying for both Best Essay and Financial Need you will need two separate essays for each scholarship you are applying for, and have two different topics from Section V.**

- Discuss one of the following topics;
  - What are the advantages and the dis-advantages of working in a Unionized Environment?
  - What can Unions do to promote awareness on Domestic Violence and how can we support members affected with Domestic Violence?
  - Name your local Unions and describe the impact in your community.
- Incorporates interviews with two SGEU members (do not list names in your essay).
- Is approximately 500-750 words long (please give actual word count \_\_\_\_\_).
- Is typed and double-spaced.
- Includes a bibliography listing at least two resources.
- Does not include your name or signature on any page.
- Failure to comply with the instructions may lead to disqualification.