



## APPLICATION – BURSARY FOR NSGEU MEMBERS

Return To: Nova Scotia Government & General Employees Union  
255 John Savage Avenue Dartmouth, NS B3B 0J3  
Fax: (902) 424-2111 Attention: Education Committee  
Email: [scholarshipsandbursaries@nsgeu.ca](mailto:scholarshipsandbursaries@nsgeu.ca)

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### Name of Member (Applicant):

\_\_\_\_\_  
Last Name First Name Middle Initial

Date of Birth (of Applicant): \_\_\_\_/\_\_\_\_/\_\_\_\_ Local: \_\_\_\_  
Day Month Year

### Complete Mailing Address:

\_\_\_\_\_  
Address City Province Postal Code

### Telephone Numbers:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Home Cell  
Work

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

School/University You Last Attended: \_\_\_\_\_

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Institution you will be attending (if different then above): \_\_\_\_\_

What degree/diploma/certificate do you plan to attain? \_\_\_\_\_

Have you ever received a NSGEU Bursary? Yes / No - If yes, when? \_\_\_\_\_

**Annual Gross Household Income (excluding dependent children):**

NSGEU Member Salary (Line 150 Notice of Assessment): \_\_\_\_\_

Spouse/Common Law Spouse Salary (Line 150 Notice of Assessment): \_\_\_\_\_

**Names of ALL financial dependents at home or attending post-secondary institution?**

\_\_\_\_\_

I certify that the foregoing statements are complete to the best of my knowledge and hereby give authorization to NSGEU to verify any information given on this application.

Date: \_\_\_\_\_

Signature of NSGEU Member (Applicant): \_\_\_\_\_

**\*\*\*Please Note: Only successful applicants will receive notification of being awarded a member bursary.\*\*\***

**FOR OFFICE USE ONLY:**

Information Complete: \_\_\_\_\_ Information Incomplete: \_\_\_\_\_

Name of Award Given: \_\_\_\_\_ Amount: \_\_\_\_\_

Date: \_\_\_\_\_ Chairperson's Signature: \_\_\_\_\_