



TEAM-IFPTE Local 161
Annual Scholarship Application Form
TEAM Member

Please Print

Member Name: _____

Address: _____

Postal Code: _____ Office Phone: _____

Position Title: _____

Name of Education Institution, Course or Seminar: _____

Please include:

1. An outline of the training you are currently taking or registered to take.
2. A brief explanation of how the training will help you in your current job and/or how it fits with your career aspirations and goals.
3. Evidence of current enrollment and the cost of the training.

I confirm that for the above training I have not previously received a scholarship award from TEAM and I am not being reimbursed by the Company:

Signed: _____ Date: _____

Mail to:

ATTN: Scholarship Committee

TEAM-IFPTE Local 161
200-1 Wesley Avenue
Winnipeg
Manitoba R3C 4C6

or

Internal mail code B2000

DEADLINE FOR APPLICATION IS September 16, 2019