

## **TEAM-IFPTE Local 161**

## Annual Scholarship Application Form Member's Child

Please Print
Student Name:
Address:
Postal Code: Phone:
Name of Education Institute:
Name of Parent/Guardian:
Parent/Guardian Work Location:
I confirm that I have not previously received a scholarship award from TEAM.
Signed: Date:

## Please include:

- A copy of the official transcript of marks for all final Grade 12 courses or equivalent technical or academic transcripts detailing marks and grades obtained.
- 2. Proof of first year enrollment and acceptance in a post-secondary institution for the 2020-2021 year.
- 3. A brief overview of interests, social activism, volunteerism, and future career plans.
- 4. A written character reference (not from a relative).

## Mail to:

ATTN: Scholarship Committee

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

team@teamunion.mb.ca