



**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

team@teamunion.mb.ca

**DEADLINE FOR APPLICATION IS September 25, 2020**