## EDUCATIONAL TRUST FUND APPLICATION FORM

NAME:	DATE:
STATION:	DEPARTMENT:
	E FULL-TIME OR PART TIME:  e 4.3 of the Collective Agreement and eligibility is defined as per Article 4.35(b) )  E: PART TIME
DESCRIBE EDUCATION/TRAIN	NING:
EDUCATION/TRAINING OFFE	RED BY:
COURSE FEES:	
START DATE OF COURSE:	
ESTIMATED DATE OF COMPL	ETION:
DESCRIBE HOW THIS TRAINING/EDUCATION RELATES TO YOUR FUTURE GOALS	
PLEASE PROVIDE ANY ADDIT	TIONAL INFORMATION YOU THINK RELEVANT:
	Signature:

On completion, scan the signed application along with additional information -- course information, receipts, and transcript of final grades – and email the documents to: educationtrustfund@bellmedia.ca

Please Note: a copy of the course information must be included with your application form. Receipts and transcripts can be submitted later if not available at time of submission.

Employees must submit claims for educational courses to the Educational Trust Fund Committee no later than 6 months after completing and passing the course. Claims received after that time will not be paid.

T4A forms will be issued for the tax year for funds received.