

The Long-Term Care Committee will be offering two scholarships valued at \$250.00 each available annually to honour our past member Michael McNeil.

Individuals planning enrolment at an accredited community college or post-secondary institution in the **2020/2021** academic year may make application. The successful applicant will be required to provide proof of registration.

Eligibility is based on **CUPE Members** that work either in a nursing home facility or a facility under the Department of Community Services.

Basis of Awards shall be the applicant's financial need and current ongoing volunteerism/social activism in his/her community.

Application must be completed and on the prescribed form and must be received by the Nova Scotia Long Term Care Committee, Secretary Treasurer, not later than **May 10, 2020**. Supporting documents must be provided with the form in order for the application to be considered.

Decisions of the Long-Term Care Executive will be final. The Long-Term Care Committee assumes no responsibility for applications or supporting documents that may become lost, misdirected, or otherwise not received by the deadline. It is the applicant's sole responsibility to ensure that the application is prepared correctly, legibly and in a timely manner. Late submissions will not be considered. Consideration will be given to first time applicants.

Confidentiality Member data is highly confidential and must be treated as such. The Long-Term Care Committee will confirm that they will, at all times, keep confidential the affairs of the membership. The names of the successful applicant's will be announced at the annual conference.

All inquiries regarding the Scholarship should be directed to:

Janet MacDonald
Secretary Treasurer, LTCCC
2328 Lawrencetown Road
Lawrencetown, NS B2A 1L6
(902) 462-0774 (home); cupensltccc@gmail.com



Application Form: Part One

1. Name of Applicant:			
Last Name	First Name	Middle Initial	
2. Address:			
Street and Number	City/Town	Province	Postal Code
3. Telephone Number:			
Home	Work	Other	
4. Post-Secondary Instit	ution Attending:		
5. What degree/diploma	do you plan to attend:		
-	a financing your education? C ance □ Family Support		Other*
*Other – scholarships, burs	saries, grants, awards, or other forts of each:	unding arrangements.	
Signature of Applicant:	Date:		
	f your involvement in unpaid voluetter describing your volunteeris		• • • • • • • • • • • • • • • • • • • •
	letter completed by an individua	-	our volunteer or
-	statements and information is co the Long-Term Care Committe	= -	
Signature of Applicant:	Applicant: Date:		