



TBU Award Application Form

The District 5A, Northern Shield TBU established this Fund to assist the children of OSSTF/FEESO TBU members (or retired/deceased members) financially upon graduation. A \$300 award is available to all students who qualify.

The following are the criteria for the District 5A TBU Award:

1. The applicant must be a dependent child, stepchild, or ward of an active OSSTF/FEESO TBU member in good standing or retired/deceased member who was in good standing and an active OSSTF/FEESO TBU member prior to their retiring/passing.
2. The applicant must submit this Application, no later than **April 30**, to:

Marvin Osmond, TBU President
Ontario Secondary School Teachers' Federation
District 5A, Northern Shield
17 Moose Horn Road
Sioux Lookout, ON
P8T 1L5

Date: _____

Part A - Applicant Information

Student's First Name: _____ Student's Last Name: _____

Student's Date of Birth: _____

Secondary school you attended, or you are currently attending: _____

Year you graduated or year you will graduate from secondary school: _____

Address you want correspondence sent:

Street Address: _____ City: _____

Postal Code: _____

Part B - Member Information

Name of Parent/Guardian who is a TBU member in good standing of OSSTF/FEESO

If the member is retired/deceased, please provide month/year of retirement/passing away: ____

Member's First Name: _____ Member's Last Name: _____

OSSTF/FEESO Membership Number: _____

- Is the applicant a: Child of the member
 Stepchild of the member
 Ward of the member

Work Location: _____ Work Phone Number: _____

Home Phone Number: _____ Cell Phone Number: _____

Personal E-mail Address: _____

Is your permanent address the same as above: Yes No

If no, please provide your permanent address:

Street Address: _____ City: _____

Postal Code: _____

I hereby consent to the collection and use of the above-noted information by the Ontario Secondary School Teachers' Federation. This information shall be used exclusively for the purposes of union administration and the representation of our members.

Name of Parent/Guardian: _____

Signature: _____