



NOTICE TO MEMBERSHIP – UNIFOR LOCAL 410 (August 2019)

Scholarship application forms for the Bernard “Copper” Murphy Memorial Scholarship and the Ann Neville Scholarship for the 2019-2020 Academic Year are now available from the Regional Rep/Unit Chairperson in your area or through your Local Executive Officers.

The Bernard “Copper” Murphy scholarship is for a student who will be attending a first year program at a post-secondary institution. The Ann Neville scholarship is for a student who is entering their second year of studies at a post-secondary institution.

Please note that the deadline date for applications to be received at the UNIFOR office in St. John’s is **Monday September 23, 2019**. Applications received after this date will not be considered.

If you have any questions or require clarification, please contact a member of your scholarship committee.

In Solidarity,

Local 410 Scholarship Committee

Adele Jackman - Chairperson

Barry Crocker

Jim Shea



August 2019

**SCHOLARSHIP APPLICATION
BERNARD “COPPER” MURPHY MEMORIAL SCHOLARSHIP**

SCHOLARSHIP: ONE \$1,000.00 SCHOLARSHIP WILL BE AWARDED FOR THE 2019-2020 ACADEMIC YEAR.

ELIGIBILITY: APPLICANTS FOR THE BERNARD “COPPER” MURPHY MEMORIAL SCHOLARSHIP MUST BE THE CHILDREN OF A UNIFOR LOCAL 410 MEMBER, THE CHILDREN OF A RETIRED UNIFOR LOCAL 410 MEMBER, THE CHILDREN OF A DECEASED UNIFOR LOCAL 410 MEMBER, CHILDREN UNDER LEGAL GUARDIANSHIP OF A UNIFOR LOCAL 410 MEMBER, RETIRED UNIFOR LOCAL 410 MEMBER OR DECEASED UNIFOR LOCAL 410 MEMBER.

THE APPLICANTS MUST BE ACCEPTED FOR ADMISSION AS A FULL-TIME STUDENT AT AN ACCREDITED COLLEGE OR UNIVERSITY, NURSING OR TECHNICAL OR VOCATIONAL SCHOOL OFFERING CREDIT COURSES.

QUALIFICATIONS FOR SCHOLARSHIPS: APPLICANTS MUST HAVE SUCCESSFULLY COMPLETED THE PRESCRIBED COURSE OF STUDIES FOR GRADE 12. ALTHOUGH ACADEMIC EXCELLENCE IN GRADE 12 EXAMINATIONS WOULD BE AN ASSET, THE SCHOLARSHIPS WILL NOT BE GIVEN ON THE BASIS OF GRADES ALONE. OTHER PERTINENT FACTORS WILL RECEIVE CONSIDERATION, i.e., THE SUCCESSFUL APPLICANT MUST HAVE ALSO DEMONSTRATED GOOD CHARACTER, LEADERSHIP ABILITY AND A DESIRE TO IMPROVE AND MOVE AHEAD.

ADMINISTRATION: THE SCHOLARSHIP COMMITTEE WILL BE RESPONSIBLE FOR THE OVERALL ADMINISTRATION OF THE PROGRAM.

TOGETHER WITH THE FORMAL APPLICATION, APPLICANTS MUST SUBMIT THE FOLLOWING:

- (1) TRANSCRIPTS OF MARKS
- (2) PROOF OF ENROLLMENT AT OR ACCEPTANCE BY A POST-SECONDARY INSTITUTION.
- (3) A SHORT STATEMENT OF INTERESTS AND GOALS AND ANY OTHER DATA THE APPLICANT DEEMS RELEVANT.
- (4) AN ESSAY OF 1000-1500 WORDS ON THE LABOUR HISTORY RELEVANT TO THE APPLICANT'S REGION.

A PERSON CAN WIN ONLY ONE UNIFOR LOCAL 410 SCHOLARSHIP IN THEIR POST SECONDARY CAREER.

Do not direct any applications to the Scholarship Committee Members. All applications for the Scholarships must be sent to the Local Union Office and be post-marked or stamped at the office no later than Monday, September 23, 2019 of the post-secondary enrollment year. Scholarships will be awarded on or about September 27, 2019. The Scholarship Committee will, in the intervening time period, review and evaluate all applications and conclude the successful applicants.

APPLICATIONS AND OTHER RELATED MATERIAL SHOULD BE SENT TO:

**BERNARD “COPPER” MURPHY MEMORIAL SCHOLARSHIP
UNIFOR LOCAL 410
330A PORTUGAL COVE PLACE,
ST. JOHN'S, NL A1A 4Y5**



**2019-2020
UNIFOR LOCAL 410
BERNARD "COPPER" MURPHY MEMORIAL
SCHOLARSHIP APPLICATION**

NAME OF STUDENT / APPLICANT:

DATE OF BIRTH:

ADDRESS:

Street	P.O Box	City/Town
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Province	Postal Code	Telephone
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**HIGH SCHOOL ATTENDED:
NAME:**

ADDRESS:

Street	P.O Box	City/Town
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Province	Postal Code	Telephone
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YEAR GRADUATED:

NAME OF UNION MEMBER:

ADDRESS:

Street	P.O Box	City/Town
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Province	Postal Code	Telephone
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PLACE EMPLOYED:

RELATIONSHIP TO APPLICANT:

SIGNATURE OF MEMBER:

SIGNATURE OF STUDENT/APPLICANT:

SIGNATURE OF UNIFOR LOCAL 410 EXECUTIVE OFFICER OR UNIT OFFICER:

DATE:



August 2019

**SCHOLARSHIP APPLICATION
ANN NEVILLE MEMORIAL SCHOLARSHIP**

SCHOLARSHIP: ONE \$1,000.00 SCHOLARSHIP WILL BE AWARDED FOR THE 2019-2020 ACADEMIC YEAR.

ELIGIBILITY: APPLICANTS FOR THE ANN NEVILLE MEMORIAL SCHOLARSHIP MUST BE THE CHILDREN OF A UNIFOR LOCAL 410 MEMBER, THE CHILDREN OF A RETIRED UNIFOR LOCAL 410 MEMBER, THE CHILDREN OF A DECEASED UNIFOR LOCAL 410 MEMBER, CHILDREN UNDER LEGAL GUARDIANSHIP OF A UNIFOR LOCAL 410 MEMBER, RETIRED UNIFOR LOCAL 410 MEMBER OR DECEASED UNIFOR LOCAL 410 MEMBER.

THE APPLICANTS MUST ALREADY BE ENROLLED AS A SECOND YEAR FULL-TIME STUDENT AT AN ACCREDITED COLLEGE OR UNIVERSITY, NURSING OR TECHNICAL OR VOCATIONAL SCHOOL OFFERING CREDIT COURSES.

ADMINISTRATION: THE SCHOLARSHIP COMMITTEE WILL BE RESPONSIBLE FOR THE OVERALL ADMINISTRATION OF THE PROGRAM.

TOGETHER WITH THE FORMAL APPLICATION, APPLICANTS MUST SUBMIT THE FOLLOWING:

- (1) MOST RECENT TRANSCRIPT OF MARKS**
- (2) PROOF OF ENROLLMENT AT A POST-SECONDARY INSTITUTION**
- (3) AN ESSAY OF 1000-1500 WORDS ON THE LABOUR HISTORY RELEVANT TO THE APPLICANT'S REGION**

A PERSON CAN WIN ONLY ONE UNIFOR LOCAL 410 SCHOLARSHIP IN THEIR POST SECONDARY CAREER.

Do not direct any applications to the Scholarship Committee Members. All applications for the Scholarships must be sent to the Local Union Office and be post-marked or stamped at the office no later than Monday, September 23, 2019 of the post-secondary enrollment year. The Scholarships will be awarded on or about September 27, 2018. The Scholarship Committee will, in the intervening time period, review and evaluate all applications and conclude the successful applicants.

APPLICATIONS AND OTHER RELATED MATERIAL SHOULD BE SENT TO:

**ANN NEVILLE MEMORIAL SCHOLARSHIP
UNIFOR LOCAL 410
330A PORTUGAL COVE PLACE
ST. JOHN'S, NL
A1A 4Y5**



**2019-2020
UNIFOR LOCAL 410
ANN NEVILLE MEMORIAL SCHOLARSHIP APPLICATION**

NAME OF STUDENT / APPLICANT:

DATE OF BIRTH:

ADDRESS:

Street	P.O Box	City/Town
Province	Postal Code	Telephone

NAME OF INSTITUTION YOU ARE PRESENTLY ATTENDING:

NAME:

ADDRESS:

Street	P.O Box	City/Town
Province	Postal Code	Telephone

COURSE OF STUDY ENROLLED IN & EXPECTED GRADUATION DATE: _____

NAME OF UNION MEMBER:

ADDRESS:

Street	P.O Box	City/Town
Province	Postal Code	Telephone

PLACE EMPLOYED:

RELATIONSHIP TO APPLICANT:

SIGNATURE OF MEMBER:

SIGNATURE OF STUDENT/APPLICANT:

SIGNATURE OF UNIFOR LOCAL 410 EXECUTIVE OFFICER OR UNIT OFFICER: _____

DATE:
