



## YEU Education Application

<u>Funding Request for:</u>	<u>Course</u>	<u>Course Date(s)</u>	<u>Location</u>
YFL Course:	_____	_____	_____
CLC Winter School	_____	_____	_____
Conference:	_____	_____	_____
Other _____	_____	_____	_____
Course Tuition (if known) _____		Travel required? Y ____ N ____	
If NOT a Union course, describe course content: _____			
_____			

Your Name: _____	Email: _____
Address: _____	
Phone: _____ h _____ w _____	Female _____ Male _____
Employer: _____	Job Title: _____

PSAC Member #: _____	LOCAL NUMBER _____	Y0 _____
Member since: _____ Union Offices held: _____		
Have you taken the PSAC TUB or BUS course: Y ____ N ____ Date: _____		

How will this training benefit you? _____
_____
How will you use this training in your union work? _____
_____

<b>Special Needs:</b> _____
_____
YEU/PSAC has a family care allowance policy for members attending in-residence courses. Contact the YEU Office for more information.

**NOTICE TO MEMBERS RECEIVING FUNDING FOR EDUCATIONAL OPPORTUNITIES:**

In Accordance with the Bylaws of the Yukon Employees Union (YEU) and the requirements of the YEU Education Committee, following are expectations and obligations that members must abide by: Attend all classes, and actively participate in all training requirements including evening course work,

1. Submit a written report to the YEU Education Committee, providing a critique of the course and a plan of action about how the course will be used, and
2. At all times, uphold the dignity of the Union and respect all confidence pertaining to the Yukon Employees Union of the Public Service Alliance of Canada.

In cases where exceptional circumstances arise that prohibit compliance with the above conditions, it is the members' responsibility to convey these circumstances (in writing) to the committee.

Failure to comply with the above conditions will result in less than favorable consideration for future requests for educational opportunities.

Failure to comply with Item 1 (non attendance) may require the member to reimburse YEU for all, or a portion of, previously approved funding. This funding includes, but is not limited to, loss of salary, travel expenses and registration fees.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date of application

LOCAL PRESIDENT: I recommend that the above member attend this course.

\_\_\_\_\_  
Signature of Local President