

Transgender Fund Application York University Faculty Association

Deadline: APRIL 26, 2021

Fund information

The Transgender Fund is an entitlement for YUFA members to support transgender health services. It was gained during bargaining in 2015-16 and appears as Article 26.11 in the 2018-21 Collective Agreement. The Fund was originally a joint fund between YUFA and the Employer but is now administered solely by YUFA's Transgender Fund Committee. Beginning May 1, 2018, the fund has a value of \$40,000 per annum, and any remaining funds from one year will be carried forward to the next.

For the 2020-21 academic year, funds will be disbursed in two rounds of applications (one last Fall and, now, one in the Spring). Members who applied in the Fall are welcome to apply again during the Spring round. The remaining value of the 2020-21 fund is \$57,544.

Eligibility

The Transgender Fund Committee understands "trans" to be a broad and inclusive term, which includes genderqueer, transgender, transsexual, gender-variant, and Two-Spirit, among others needing gender affirming services. All trans members of YUFA are eligible to apply.

For the 2020-21 academic year, the Fund will prioritize costs incurred/to be incurred by YUFA members but depending on the number and value of the applications, funds may be made available to YUFA members' spouses/partners or dependents. First time applicants will also be prioritized over applicants who received support in the past (whether for themselves or their spouses/partners or dependents).

The Fund aims to help members cover the costs of day-to-day life necessities (including associated legal costs) as well as surgeries and other health related costs. If the total amount of claims exceeds the current value of the fund, a cap of \$5000 will be placed on individual disbursements. It is understood that this amount may be greater, or lesser, depending on the number of applications. The Committee recognizes that surgeries and other procedures can be very expensive and will accordingly consider the particular needs of each applicant. The Committee will consider claims for costs already incurred—as long as the applicant was a member of YUFA *at the time the costs were incurred*. **If you have any questions about what the fund covers, please write to yufa@yorku.ca.**

On Confidentiality

This YUFA Administered Fund strictly abides by a double-blind process whereby the selection committee is not provided with any identifying information about applicants. Only YUFA staff required to be directly involved in receiving the applications and dispersing the cheques will have access to identifying information. The York University Administration (the Employer) will not have access to names or applicant files.

Instructions: Complete the four sections below. Print clearly or type. Submit only pages 2 and 3 of this form, along with any relevant supporting documentation.

1. Please provide your contact information.

| Contact information | |
|---------------------|--------------------------------------|
| Name: | Phone: |
| Email: | |
| Address: | |
| City: | Postal Code: |
| Employee #: | YUFA member since (year/month/date): |
| Academic unit: | |

2. Please provide a description of your costs. If costs have already been incurred, please attach any anonymized receipts. If costs have not yet been incurred, please provide any available documentation that demonstrates the expected cost.

Costs may include, but are not limited to, the following items: surgeries and other procedures, clothes, name change and associated expenses, electrolysis, binders, packers, jane belts, wigs, breast forms, etc., including a broad range of social support services. Please feel free to include any additional items not listed here.

| Item | Amount |
|--------------|--------|
| | |
| | |
| | |
| | |
| | |
| TOTAL | |

If you require more space, please attach a separate page.

3. Please provide a brief statement that explains the needs for which you are requesting funds. If any costs listed above require further explanation, please include it in your statement.

| Statement |
|-----------|
| |

If you require more space, please attach a separate page.

4. Please sign and date your application.

I certify that all the information presented herein is true and accurate, to the best of my knowledge.

Signature: _____ Date: _____

The Committee hopes to review each application by May 4, 2021, but there may be some delays in processing payment due to YUFA staff working remotely because of the COVID-19 situation.

All decisions are final.

Due to the restrictions imposed by the current COVID-19 crisis, *all applications (including scans of anonymized receipts) must be submitted by email to yufa@yorku.ca*. Please use subject line: Transgender Fund Application – CONFIDENTIAL.

For more information about the Transgender Fund Committee, please email yufa@yorku.ca.

The YUFA Transgender Fund Committee gratefully acknowledges the work of the CUPE 3903 Trans Fund Committee, whose application form is the basis of this one, and whose application and disbursement processes have helped us develop our own. Thank you!

At the end of each disbursement period, the Committee will review its application and disbursement criteria based on feedback from members.