**CUPE 5678 Assistance Fund Application**

**All personal information will be handled in the strictest confidence.**

The Assistance Fund Committee policy is designed to help members meet their or their family’s essential needs or provide assistance in the event of exceptional or irregular expenses.

**The maximum amount available is $50 per member.**

To apply to the Fund, complete this application form and submit it via email to [assist@cupe5678.ca](mailto:assist@cupe5678.ca)

# Personal Information

Last Name:

First Name:

Street Address:

City:

Province: Postal Code:

CUPE Email:

Phone:

How much are you requesting: $50 maximum

Giant Tiger Gift Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Esso Gift Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Petro Gift Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Should your preference no longer be available, you will be contacted.

# If you have any questions about this application, please contact [assist@cupe5678.ca](mailto:assist@cupe5678.ca)

**Please explain the reason(s) you are requesting funds. If you require additional space, please include on a separate page.**

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# If you have any other information and/or supporting documentation you would like to share about why you would like assistance, please do so on a separate paper.

# Please note, not providing further information will not exclude you from receiving assistance.

# Please Print Name:

# Applicant Signature:

# Date: