



Bermuda Public Services Union  
P.O. Box HM 763 Hamilton, Bermuda HM CX  
Tel: (441) 292-6985 or 292-6484 Fax: (441) 292-1149 Email: eballjr@bpsu.bm



## **Local & Overseas Education Award Application**

### **Regulations for B.P.S.U. Education Awards**

#### **Eligibility**

- The applicant must be a BPSU Member or Dependent of a member.  
*(Dependent can be persons who are not blood related but do reside in the household as a dependent i.e. the member should be the official guardian of the dependent.)*

#### **Conditions**

- All applicants are required to submit relevant documentation to the General Secretary for the attention of the Education Awards Committee, by the 30<sup>th</sup> June of each year.
- The award is for POST secondary school education.
- Each member may submit only one application.
- Successful candidates are not eligible for another award until a four year period has elapsed, however, sibling(s) or other family members are welcome to apply the following year.

#### **Documentation**

- A current letter of acceptance or a current transcript from an approved institution offering the required education or training and, that the student is in good standing.
- Completed application form
- A photocopy of members membership card

#### **Value**

- There are six (6) B.P.S.U. awards valued at \$3,500 EACH for overseas studies.
- There are six (6) B.P.S.U. awards valued at \$1,500 EACH for local studies.

#### **Please note:**

- It is the responsibility of each applicant and/or parent(s)/guardian(s) to ensure that the application is supported by all the required documentation.
- It is the responsibility of each applicant/bearer of an application to obtain a receipt for the application. In the case of an application received by mail, a receipt will be sent to the applicant's address as stated on the application form.
- Application forms are available at the B.P.S.U. Headquarters.
- Any application that is not supported by documents and not meeting the deadline noted above will not be considered.
- All monies will be paid directly to the educational institution specified on the application form. Completed application forms together with all supporting documentation, must be submitted to the General Secretary for the attention of the Education Awards Committee, not later than the 30<sup>th</sup> June of each year.
- All successful recipients are randomly selected and the amounts awarded have no bearing on the amount of applications received.

*"Onward and Upward Together"*



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**-NO LATE ENTRIES WILL BE ACCEPTED-**

Education award for which you are applying  Overseas Award  Local Award  
*(Check appropriate box)*

**BPSU Member Information**

Membership Number \_\_\_\_\_ **Applicant is**  Member  Dependent  
*(Check appropriate box)*

*This section is to be completed if applicant is a dependent*

BPSU Member's relationship to applicant  Father  Mother  Guardian  
*(Check appropriate box)*

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # (Home) \_\_\_\_\_ Phone # (Work) \_\_\_\_\_

Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

Employer \_\_\_\_\_ Department \_\_\_\_\_

Has the applicant previously received a B.P.S.U. Education Award?  Yes  No  
*(Check appropriate box)*

If yes, which year \_\_\_\_\_

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## Applicant's Information

Full Name \_\_\_\_\_

Mr.  Mrs.  Miss  Ms. Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
*(Check appropriate box)* DD MM YYYY

Address (Bermuda) \_\_\_\_\_

\_\_\_\_\_

Phone # (Home) \_\_\_\_\_ Phone # (Work) \_\_\_\_\_

Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

Address (abroad, if applicable) \_\_\_\_\_

\_\_\_\_\_

Phone # (Home) \_\_\_\_\_ Phone # (Work) \_\_\_\_\_

Present Place of Study \_\_\_\_\_

Present Program of Study \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

If not already in school, state present occupation and location \_\_\_\_\_

\_\_\_\_\_

Proposed Program of Study \_\_\_\_\_

Name of Institution \_\_\_\_\_

*Institution you have been admitted to for the upcoming academic year*

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Address of Institution \_\_\_\_\_

**Educational Experience**

Secondary School(s), College(s), University(ies) or other institutions attended:

<i>Institution Name</i>	<i>From: (date)</i>	<i>To: (date)</i>

**Please Note:**

- A copy of current transcript or a current letter of Acceptance is required.
- It is the responsibility of the applicant to ensure that all required documents are submitted by June 30<sup>th</sup>.

I, \_\_\_\_\_ certify that the information contained in this application  
*Applicant Name*

is true and correct.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_