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**CUPE 3903**  
**WAYS AND MEANS FUND**  
**APPLICATION FORM**

**About the fund:** The Ways and Means Fund is a pool of money provided by the employer as per our collective agreement and administered by an elected committee of CUPE 3903 members. Its mandate is to make funds available to union members who find themselves in unexpected financial crisis, for example, caused by a death in the family, unforeseen illness (for yourself or dependants), theft and/or legal costs, and other emergency circumstances. The maximum award amount from this fund per application is generally \$1000 (though this may be waived at the discretion of the committee). Members may apply a maximum of once per collective agreement year (September to August). Please note that the committee may award the full amount or a portion of the amount requested, depending on the grounds for the application and the amount of funds available.

**Expected Response Time:** The committee recognizes that this fund is meant to assist members and as a result we endeavor to meet and reach a decision within ten business days of receiving applications. There may be an additional brief waiting period while the cheque is being processed.

**Appeals:** To appeal the decision of the committee, please complete another copy of this form, clearly indicating why you feel that the decision should be reviewed (including any new information that might change our mind). Clearly print "Appeal" at the top of this form. An appeals board consisting of outside as well as committee members will reconsider the original decision, taking new information into account.

Name:	Date of Application:
Date of Last Contract:	Unit:
Mailing Address:	Campus Mailing Address:
Email Address:	Phone #:

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**AMOUNT REQUESTING:** \_\_\_\_\_

Please state briefly, but with sufficient detail, the reason for this request and attach this explanation (one or more pages) to this application form. Attach all appropriate documentation - **including copies of relevant receipts** - and list what is being included in this application.

Annual Income from all Sources:	Number of Dependents:
Partner's Annual Income from all Sources (if applicable):	Unit: _____ Date of last contract: _____

**Please complete the following:**

<b>MONTHLY BUDGET</b>	
<b>Rent or Mortgage:</b>	<b>Heat (if not included):</b>
<b>Food:</b>	<b>Transportation:</b>
<b>Utilities (if not included in rent):</b>	<b>Miscellaneous expenses (please list):</b>

**I verify that all information given in this application is true:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**All Information given on this form is strictly confidential.  
Decisions are made by an elected committee of CUPE 3903 members.**

**Applications are to be submitted in a sealed envelope marked "PERSONAL AND CONFIDENTIAL" and should be addressed to the Ways and Means Committee.**

**Mail to CUPE 3903, Ways and Means Committee, 143 Atkinson Building, York University (Keele Campus), M3J 1P3.**

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