**REVISED: CUPE 3903 2018 STRIKE HARDSHIP FUND APPLICATION**

This fund is meant to offset any hardship incurred by CUPE workers participating in the strike, by supplementing strike pay. Applications can be submitted in person at the CUPE 3903 Strike Headquarters (45 Four Winds Drive, Unit 21) or via email to hardshipfund2018@gmail.com

Is this your first application **☐** or a supplementary/second application to request additional funds? **☐**

For asupplementary/second application, please underline or highlight any new information (for example,

you may have new expenses), to speed adjudication. If the only purpose of this application is to increase

your funds request from $600 to the new limit of $800, you do not need to complete pages 2 and 3 again;

just complete page 1, and remember to **sign your application** on the last page.

**Are you requesting funds related to a leave category? Yes ☐ No ☐**

**If “yes,” which type of leave would you qualify to begin, under your Unit CA, if we were not on**

**strike? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Medical and other sensitive information related to leave requests should only be sent to*

*Sheila Wilmot, Equity Officer, at cupe3903.equity.officer@gmail.com*

**First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unit : 1 2 3**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tel. #**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If awarded funds: I will pick up at Strike HQ office (fastest!) ☐**

 **Please mail to the above address (slower!) ☐**

**Number of hours of picketing/8th line (alternative strike duties) fulfilled per week \_\_\_\_\_\_\_\_\_**

This fund is meant to **supplement** Strike wages. If you have no hours to report, or you have reduced hours to report, please explain the reason/s for your reduced hours in the space provided. If you are not able to picket, or are not able to picket 20 hours each week, (including because you are on a research leave or because you teach only online) please indicate whether you have contacted the 8th Line (alternate) Strike Duties committee. If you need more space, please attach an extra sheet.

Be careful to include all the requested information and documentation **(including, for B, proof of income)** so that the committee can promptly adjudicate your claim. Please note that funds awarded may be a percentage of a total claim, with a total maximum limit of **$800** (for A and B combined) per member. **Please indicate all your hardship-related expenses, including those that exceed $800, in case additional funds are available at some point.**

**Section A: Strike-related expenses**

To claim expenses which are directly related to the strike, please include a brief reason for the claim, and a receipt or a screenshot of a web page. TTC expenses do not require receipts. You do not need to include income information for a Section A claim.

If you are unable to pay for your strike-related item/s in advance, please contact us directly at hardshipfund2018@gmail.com.

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Brief Reason** | **Cost** | **Receipt** **Attached? Y/N** |
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If you need more space, please attach a separate page.

**Total funds requested for Section A: $ \_\_\_\_\_\_\_\_\_\_\_**

**Section B: Hardship related to the strike**

To claim hardship based on reduced income during the strike period, please include the following monthly income and budget information. The committee needs all the following information to adjudicate your application.

**Include documentation, preferably pay stubs, or an explanation for why documentation is not included, for your full household income (e.g., if there is a second income in your household, please include it and document it). To calculate pre-strike income, we need your 2018 February York pay stub. If February is not typical for you, you can choose to provide pay stubs for October 2017 to February 2018, and give the average of those months as your monthly income.**

|  |  |
| --- | --- |
| Total Household Income per month (before strike) |  |
| Total Household Income per month (during strike, including strike pay)  |  |
| External funding (SSHRC, OGS, etc.) |  |
| Rent per month |  |
| Utilities per month |  |
| Groceries per month |  |
| Heat per month |  |
| Childcare per month |  |
| Transportation per month  |  |
| Strike related costs (indicate one-time/month) |  |
| Other (indicate one-time/monthly) |  |
| Number of dependents (children, spouse, et al)(Is your spouse is a CUPE 3903 member?) |  |

**Total funds requested for Section B: \_\_\_\_\_\_\_\_\_\_\_\_\_**

Use the space provided below and on the next page to outline the circumstances of your financial hardship including any health issues or other extenuating circumstances. Please provide information on any expenses you have incurred as a direct result of the strike. (Attach another page if necessary).

**Funding Request**

**Section A: \_\_\_\_\_\_\_**

**Section B: \_\_\_\_\_\_\_**

**Total: \_\_\_\_\_\_\_\_\_\_\_**

**Application Checklist**

☐ I have indicated my number of weekly hours doing strike duty (picketing or 8th Line) on page 1.

☐ If my number of weekly hours is less than 20 (p. 1), I have described my circumstances

☐ My application contains my signature (p. 4)

**If you application includes Section A (pg 2)**:

☐ I have included receipts for claimed expenses except TTC fare OR I have contacted the committee because I could not afford an advance purchase.

**If your application includes Section B (pg 3):**

☐ I have included my February pay stub or, if February is not representative of my income, I have included October - February pay stubs so income can be averaged.

☐ I have included my total household pre-strike and strike income for all the members of my household (household doesn’t include roommates unless you live as or like a family unit).

☐ I have included my total household pre-strike and strike income, counting other work, other funding and any funds I am getting from York University for an RA.

☐ I have included my number of dependents, counting my spouse.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note: using an electronic signature is fine; typing your name is **not** fine.