O.C.E.T.F. BURSARY APPLICATION FORM

The OCETF Bursaries are awarded annually to members in good standing who are no higher than A-2 on the salary grid to assist their professional development while raising their salary level.

Submit application to Cheryl Morris via fax at (613) 829-0869 at the OCETF Office or board mail.

Name: _____

Address: _____

School: _____

Number of years as an O.C.E.T.F. member: _____

Current grid placement: _____ Years of experience: _____

Course(s): _____ Location: _____

When will this course be taken? _____

Anticipated costs: Tuition: _____ Travel: _____

Child care: _____ Other: _____

Is your salary the sole source of income in your household? _____

Additional Information: _____

_____

Number of Dependants: _____ Ages: _____

Briefly describe why you feel you would be a deserving recipient of an OCETF bursary: