



# USW FAMILY and COMMUNITY EDUCATION FUND (FCEF) APPLICATION FOR PROJECT FUNDING

**Which District is the request coming from?**

District 3

District 5

District 6

National

**Preferred language of correspondence:**

English

French

**Please check the box beside the applicable group making the request and provide the information required:**

Local Union

District or CNO

Other: \_\_\_\_\_

**Contact Person Information**

Name (print): \_\_\_\_\_

Role held in USW: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

Where applicable please specify:

Local #: \_\_\_\_\_ Local's Telephone: \_\_\_\_\_

Local mailing address:

President's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

President's Email: \_\_\_\_\_

Staff Rep's Name: \_\_\_\_\_







## CONDITIONS OF FUNDING

In the event that this application for funding is approved, the following conditions must be met within 30 days of the completion of the project, otherwise funds could be withheld or repayment required:

- Provide copies of expenses incurred (E.g., receipts, invoices, memos, etc.)
- Provide digital copies of a minimum of 5 pictures taken during the event
- Write a full report outlining the activity. The report can be sent by email and should include some of the following:
  - Number of participants
  - Whether or not the project met its objectives, and how
  - Positive elements and/or obstacles encountered
  - Feedback from participants and/or organizers
  - How you could build on this project's positive results

Signature of Local president, other elected officer or staff representative responsible for sponsoring this project:

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*Name Print*

*Signature*

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*Date*

*Title*

Send this application form by one of these methods:

Email: [FCEF@usw.ca](mailto:FCEF@usw.ca)

Fax: Attention FCEF at (416) 482-5548

Mail: FCEF, c/o USW Canadian National Office, 800-234 Eglinton Ave. E., Toronto, ON M4P 1K7

