

NATIONAL BURSARY PROGRAM



SEIU Local 2 is pleased to be offering a yearly bursary program totalling \$10,000 that awards up to seven bursaries to full-time students who will be attending or returning to a university or community college.

Only active SEIU Local 2 Members and their dependants will be eligible to apply.

To qualify for consideration, the following criteria needs to be submitted no later than:

May 2, 2025

1. Completed application form
2. Proof of acceptance into a university or community college
3. Student ID number
4. A typed essay of a maximum of **500 words** on the essay topic:

“Why Unions are still important in Canada.”

Please submit all information by mail or by email to:

Attention: Bursary Program
SEIU Local 2 Canada
163 Wyse Road
Dartmouth, NS B3A 1M5

Or by email/scan to
Bursary2025@seiulocal2.ca

The bursary amounts awarded will be as follows: three \$1,000 regional awards, three \$1,500 regional awards, and one \$2,500 national award. Regional awards will mean one applicant per regional from the West, East, and Central regionals of Canada. Only the seven successful candidates will be notified.

We wish all participants the best of luck.

In Solidarity,

A handwritten signature in black ink, appearing to read "David Bridger".

David Bridger
President, SEIU Local 2

303 Waverley Street
Ottawa, ON K2P 0V9
P 613-567-3528
F 613-567-0924

572 Arthur St. W., POB 32001
Thunder Bay, ON P7E 0A1
Toll 1-888-887-5343
P 807-473-9651
F 807-473-3632

SEIU 2 - Head Office
2600 Skymark Ave, 2-200
Mississauga, ON L4W 5B2
Toll 1-800-663-6841
P 905-602-7477
F 905-602-7476
seiulocal2.ca

163 Wyse Road
Lower Level
Dartmouth, NS B3A 1M5
P 902-455-1095
F 902-455-1855

7128 Gilley Avenue
Burnaby, BC V5J 4X2
P 604-540-7774
F 604-540-7779



NATIONAL BURSARY APPLICATION FORM

Name of Applicant: _____

Mailing Address: _____

Province: _____ Postal Code: _____

Phone: _____

Email Address: _____

Name and location of the school you are confirmed to attend for the 2025/26 school year:

Student ID Number: _____

Name of eligible SEIU Local 2 Member, their employer's name and workplace location:

Member Signature: _____

Applicant Signature: _____

Date: _____

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