INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 987A

1008 Wall Street
Winnipeg, Mb. R3G 2V3

Phone: 786-8658
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TRAINING AND EDUCATION FUND

PURPOSE:

The purpose of the training and education fund is to provide education and / or development for its members affected to the extent that funds are available in the training and education fund. This may be done in a variety of ways subject to the approval of the training and education fund committee.

GUIDELINES:

1. Who is eligible:
   a) Members of I.U.O.E. Local 987 "A" Charter employed at the Western Glove Works who are members in good standing.
   b) A member who became a member after October 1, 2001 and has been in good standing for a minimum of twelve (12) months, or any member who is in good standing and who was a member prior to October 1, 2001.
2. Members are required to make application utilizing only the form provided.
3. a) Courses **must** be either for the purpose of skill development or up-grading current educational levels to meet future job requirements, or to alleviate disparities that may exist.
   b) Courses that fall within the guidelines outlined in 3a) shall include seminars, university courses, community college courses, night school courses, and correspondence courses.
4. Maximum amount available is $200.00 per member on a non-cumulative basis for the period September 1st to August 31st yearly. Amount includes required textbooks. Any form of membership fee, as determined by the Committee, and the cost of related equipment **will not be paid**. The fund will pay 50% of course cost (or 50% of balance of applicant's available funds) upon proof of registration (ORIGINAL RECEIPT ONLY) and the balance upon completion of the course. In the event a member is laid off, he/she must provide proof of completion of the course within six (6) months following the lay-off date to be eligible to receive final payment.
5. Full time employees shall be entitled to the yearly maximum per funding year as per 4.
   Part time employees who are employed in a position that is 0.5 eft or greater shall be entitled to a pro-rated yearly maximum. Employees who are employed in a position that is less than 0.5 eft shall be entitled to 50% of the yearly maximum. Casual employees will be dealt with on a case by case basis at the sole discretion of the Committee.
6. If training and education funds are fraudulently applied for, or if there is a lack of participation by an incumbent in a course paid for by the fund, then all monies for that course will be recovered by the Union.
7. The committee reserves the right to review applications. All applications must be approved by the training and education fund committee. The training and education fund committee reserves the right to request additional supportive information and /or documentation for courses applied for.
8. The committee is comprised of five members of IUOE Local 987D who are employees of the Misericordia Health Centre. The five committee members will be elected from the membership at an election called for the specific purpose of electing Committee members. The Chairman will be the Business Manager of IUOE Local 987D or Designate.
9. Committee members shall abstain from voting on their own applications.
10. The training and education fund committee reserves the right to amend the guidelines as deemed necessary by a majority vote of the committee at a special meeting called for the purpose of revisions to the policy or guidelines.

NOTE:
Completion does not mean successful completion (passing) but means that the incumbent made an honest effort and attended classes. Proof of attendance or certification of completion may be requested.

OFFICE USE ONLY

DATE OF COMMITTEE MEETING:_____

☐ APPROVED IN PRINCIPLE ONLY. LETTER TO BE SENT TO MEMBER STATING SAME.

☐ APPLICATION REJECTED. REASON:_____

_____

_____

_____

LETTER TO BE SENT ADVISING MEMBER OF REASON APPLICATION REJECTED.

☐ APPROVED INSTRUCTIONS:

_____

_____

_____

_____

Date:_____Chq #_____Amt:_____

Date:_____Chq #:_____Amt:_____

_____

AUTHORIZED SIGNATURE

S.I.N. _____

FILE # _____

DATE RECEIVED:_____

PLEASE PRINT

Mr.
Mrs. _____
Last Name First Name Initial

Address:_____

_____
City or Town Postal Code

Telephone:_____
Home Work

ONE COURSE PER APPLICATION

Present Employer: _____

Employed as: _____

TO ENSURE PROMPT PROCESSING PLEASE MAIL OR DELIVER THIS APPLICATION TO THE UNION OFFICE BEFORE THE FOLLOWING DATES:

OCTOBER 1st JANUARY 1st
APRIL 1st JUNE 1st

Name of Course Applied for _____

Start Date of Course Applied for:_____ Completion Date of Course (approximately)_____

Course Costs: Tuition _____ Course taught at:_____

Required Textbooks: _____ Or Correspondence Course:_____

Total Costs: _____ Is this a Hobby Course? _____

PLEASE ANSWER YES OR NO TO THE FOLLOWING QUESTIONS.

1. Are you requesting approval in principle only?_____If YES, please submit any pertinent information relating to course such as course outline, length of course, course provider, etc.
2. Is this course related to your employment?_____If YES, explain _____
_____
3. Have you attached? (Please check)
   - ☐ a) Original registration receipt?
   - ☐ b) Copy of course outline?
   - ☐ c) Textbook receipt?
   - ☐ d) If complete, proof of completion?

The Union reserves the right to recover funds from the applicant and withhold the balance of payment for the course applied for in the event the member does not participate in the course.

APPLICANT'S SIGNATURE:_____DATE:_____