Office Use Only

Les Butterworth Scholarship Fund
Reference Form 2022

The purpose of this form is to assist us in evaluating your scholarship/bursary application. You are responsible for sending copies of the evaluation form to two responsible people (not relatives) who have known you for at least two years and are familiar with your educational background, goals, achievements and personal character.

I. This section to be completed by applicant

APPLICANT'S NAME_____

☐ I waive my rights to view this reference

II. To be completed by person giving the reference.

Name of Reference:		**Occupation:**
Address:		**Phone:**
How long have you known the applicant?	**In what way are you associated with the applicant?**	

In a general statement, explain why you believe the applicant should be awarded a scholarship or bursary. Please include comments on leadership qualities, work experience and community involvement. (Note: Attach a separate sheet if more room is needed**)**

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_____ **Signature of Reference**	**Return completed form to**: CUPE Local 500 702 – 275 Broadway, Winnipeg, Mb. R3C 4M6 Fax: 956-1439 or Email: amanicotto@cupe500.mb.ca **(by no later than Monday, July 4 2022)**

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I. This section to be completed by applicant

APPLICANT'S NAME_____

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Name of Reference:		**Occupation:**
Address:		**Phone:**
How long have you known the applicant?	**In what way are you associated with the applicant?**	
In a general statement, explain why you believe the applicant should be awarded a scholarship or bursary. Please include comments on leadership qualities, work experience and community involvement. (**Note:** Attach a separate sheet if more room is needed)		
_____ Signature of Reference	**Return completed form to**: CUPE Local 500 702 – 275 Broadway, Winnipeg, Mb. R3C 4M6 Fax: 956-1439 Email: amanicotto@cupe500.mb.ca **(by no later than Monday, July 4, 2022)**	
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