

Thompson Rivers University Open Learning Faculty Association

TRUOLFA Bursary

Mission: To regulate relations between employees and employers, including, but not limited to, the right to bargain collectively on behalf of the employees within the jurisdiction of the Association; and to bring about improvements in the wages and working conditions of the membership without discrimination on the basis of appointment, assignment or job security.

Vision: To promote the provision of the highest possible standard of open and flexible distance learning

Open Learning Student Bursary Application Form

Your Name:	
Your TRU Student Id	
TRU Email Address	
Personal Email Address	
Application Date:	
Mailing address:	
Where do you presently reside?	
Telephone:	Home: <input type="text"/> Office: <input type="text"/>
Are you a Canadian citizen? Are you a Canadian Landed Immigrant?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> No

<p>Your Faculty:</p>	<p> <input type="radio"/> Faculty of Adventure, Culinary Arts & Tourism <input type="radio"/> Faculty of Arts <input type="radio"/> Faculty of Education & Social Work Work <input type="radio"/> Faculty of Law <input type="radio"/> School of Nursing <input type="radio"/> Faculty of Student Development <input type="radio"/> Faculty of Science <input type="radio"/> School of Trade & Technology </p>
<p>Number of OL courses taken in current calendar year:</p> <p>Total Number of OL courses completed:</p> <p>Major:</p> <p>Will you register for Open Learning Courses in the following calendar year?</p> <p>Are you registered as a TRU on-campus student?</p> <p>Are you enrolled at another post-secondary institution: Name of Institution</p>	<p>[Greyed out input area]</p> <p>[Greyed out input area]</p> <p>[Greyed out input area]</p> <p>[Greyed out input area]</p> <p>[Greyed out input area]</p> <p>[Greyed out input area]</p> <p>[Greyed out input area]</p>
<p>Academic Program/Subject Area:</p>	<p>[Greyed out input area]</p>
<p>Open Learning Course Id, Title, Name of the Instructor and Date of completion (Please provide recent official transcripts with application)</p>	<p>[Greyed out input area]</p>
<p>What is your career/professional goal?</p>	<p>[Greyed out input area]</p>

Describe your experience at TRU-OL, and outline how enrolling in Open Learning has satisfied your education and personal goals:



Name and contact information of the Open Learning Faculty Member writing a letter of support.

Please save this application form to your hard drive and then submit the form, along with all your supporting documentation to bursary@truolfa.ca All documents must be sent in a single email or the application will not be accepted.

Please check the supporting documents that will be included with your application. Emailed document must conform to the following format:

<p>Proof of citizenship or landed immigrant status</p> <p>Note: Send copies only. Do not send original documents</p>	<p><input type="radio"/> Birth Certificate</p> <p><input type="radio"/> Canadian Passport</p> <p><input type="radio"/> Canadian Citizenship Card</p> <p><input type="radio"/> Canadian Landed Immigrant Card</p>
<p>Official Transcripts</p>	<p><input type="checkbox"/></p>
<p>Letters of Support/Reference</p>	<p><input type="checkbox"/></p>

Note the following format for supporting documents:

Official Transcripts: **Surname_First Name_ TRUOLFA Bursary_Transcripts**

Letter of Support: **Surname_First Name_ TRUOLFA Bursary_Reference_Name of Referee**

If you wish to print and mail your application with supporting documentation, please use the following address:

**Thompson Rivers University Open Learning Faculty Association
17100 Fedoruk Road
Richmond, BC, V6V 1C7**