



## CUPE 4613 Hardship Fund Application

**CUPE4163** Please complete all fields and email application and attachments to [cupe4163@uvic.ca](mailto:cupe4163@uvic.ca).

All Information given on this form is strictly confidential to the Hardship Committee. The University of Victoria will be collecting your personal information for the purposes of **assessing eligibility to access funds from the Teaching Assistant Hardship Fund**. This information is collected under section 26 (c) of the Freedom of Information and Protection of Privacy Act. If you have any questions or concerns about how your personal information is handled please contact [privacyinfo@uvic.ca](mailto:privacyinfo@uvic.ca).

Once the Committee has adjudicated, members will be informed as to the result of the application. Should additional information be required, the Committee will email the member, though this will cause a delay in the file's adjudication.

### Member Information

Name		V#		Phone	
Email		Department		Most recent T.A. contract end date	

### Request Details

Please give a brief but sufficiently detailed reason for this request and attach appropriate support documentation.

### Itemized List of Expenses Related to Award Request

Item	Amount
<b>Total amount requested</b>	

**Supporting Documents** Please list & briefly explain all documents (e.g. relevant receipts) attached to your application.

Document	Explanation

**Additional Information**

Estimated Annual Income (from all sources)	
Partner's Estimated Annual Income (from all sources)( <i>if applicable</i> )	
Number of Dependents ( <i>if applicable</i> )	
<b>Monthly Expenses</b>	
Rent/Mortgage	
Utilities	
Food/Groceries	
Transportation	
Other Non-Discretionary Monthly Expenses	

**I certify that all information presented herein is accurate to the best of my knowledge.**

Signature

**For Hardship Committee Only**

<input type="checkbox"/> <b>Approved by Hardship Committee</b>	<b>Amount:</b>
<input type="checkbox"/> <b>Declined by Hardship Committee</b>	<b>Reason:</b>

Position #	
Name	Signature
Union:	
Union:	
University:	
University:	