

## **Worker Co-operative Education Bursary Application**

CANADIAN WORKER CO-OPERATIVE FEDERATION

## **Bursary Overview**

The Worker Co-op Bursary Program is an initiative of the Canadian Worker Co-operative Federation (CWCF) in 2025. The bursary seeks to support the educational objectives of those individuals who have the potential to strengthen the worker co-operative sector. The education and/or training desired, the activities and experiences of the individual seeking the training, and the potential of that individual with this additional supported training/education to create impact will be the key criteria in consideration for the grants.

There is potential for a total of two grants of up to \$5000 each. Applicants may request any amount up to the maximum of \$5000 although CWCF reserves the right to approve a higher number of grants for a lower amount.

NOTE: students in the CoopZone training program are not eligible, because CWCF has provided separate bursary funding for that program. Applications for the CoopZone bursary should be made directly to CoopZone.

Application deadline: March 7<sup>th</sup> 2025, with decisions to be made before March 21<sup>st</sup> 2025 at the latest.

These bursaries are non-renewable. Funds must be used by August 31st, 2025.

## First Name: Preferred Pronouns: Name of Worker Co-operative or Organization, if any: Address: City: Province: Postal Code: Phone number: E-mail:

## **Evaluation Criteria**

Program or type of study:

**Personal Information** 

Identify the type of training sought and why this would benefit you, your co-op and/or the worker co-op sector. How will this training enhance the worker co-op sector?:

Degree or certificate sought (if applicable). Please describe this training program and supporting information or links for more information about the program:
Please describe your relevant worker co-operative experience, background and interests:
Do you have a particular role related to or passion for worker co-operatives?:
Describe how this training will enhance your skills and expertise and how you believe this added training can enhance your potential to make a difference in the worker co-op sector:

Have you already applied for this prog	gram?	
If so, have you been accepted into the	e program? Yes No	
Include the dates the program will run Start Date:	n: End Date	
Financial Need		
Amount of funding you are requesting	g:	
Describe your need for financial as	ssistance	
To help us determine your eligibili program costs (other scholarships support from your co-operative, so Annual cost of the program:	/bursaries you have applied for/re	• • •
Sources of funding	Amount \$	Confirmed (yes/no)
Sources of funding CWCF	Amount \$	Confirmed (yes/no) NO
	Amount \$	
	Amount \$	
	Amount \$	
CWCF		
CWCF  Total  Letter of Support  Please provide a letter of support from confirmation of your worker co-op exp commitment to the sector, suitability for	\$ your co-op, employer or related wor erience, connection or similar. It sho	NO ker co-operative entity. Include
CWCF  Total  Letter of Support  Please provide a letter of support from confirmation of your worker co-op exp	\$ your co-op, employer or related wor erience, connection or similar. It sho	ker co-operative entity. Include uld include attestation to your

Please return the completed form along with your letter of support to Operations and Member Services Manager Kaye Grant, <a href="mailto:communications@canadianworker.coop">communications@canadianworker.coop</a>