

CUPE·SCFP MANITOBA

Small Local Assistance Application

Please note as per the CUPE Manitoba Bylaws (Article 7), Small Local Assistance is limited to locals of one hundred (100) members or less.

Local #: _____

Contact Person: _____

Mailing Address: _____

Phone #: _____

E-mail Address: _____

Delegate's Name: _____

Number of Members: _____

Has your local received Small Local Assistance in the past?

Yes If so, when? _____

No

Small Local Assistance Application

Has the delegate attended CUPE Manitoba Convention before?

Yes If so, when? _____

No

Please describe the delegate's union involvement.

Financial Circumstances: Please comment on your local's financial circumstances (i.e. total cost of sending a delegate, transportation, lost wages, registration, etc.). Please include a copy of your latest Trustees' Report for the CUPE Manitoba Executive's information.

Educational Needs of the Local: Please explain how the Convention will benefit your local.

Signature of Local President: _____

**Please submit directly to the CUPE Manitoba office by:
4 PM on April 13, 2025**

**Email: officeadmin@cupe.mb.ca
205-275 Broadway, Winnipeg, MB R3C 4M6**