



## CUPE NL and Higgins Insurance 2026 Scholarship

Annually, CUPE Newfoundland and Labrador awards the **CUPE Newfoundland Labrador and Higgins Insurance Scholarship**. There are 3 scholarships to be awarded in the amount of \$1000 each.

Individuals who meet the eligibility criteria outlined below and who are planning to enroll at an accredited post-secondary institution in the 2026–2027 academic year are invited to apply.

### Eligibility

Union members in good standing with a local union affiliated with CUPE Newfoundland and Labrador, and/or a child or legal ward of a member in good standing with a local union affiliated with CUPE Newfoundland and Labrador.

### Awarding Criteria

Only applications that are completed in full will be considered. All applications must include a Scholarship Application Form, a current cover letter and resume outlining the applicant's ongoing volunteerism and/or social activism within their school, union and/or community and a reference letter will be considered. Consideration will be given to first time recipients of the scholarship.

Application must be complete on the scholarship form and must be received by CUPE Newfoundland Labrador no later than **February 28, 2026**, with all supporting documents for the application to be considered. Applicants are asked to include a picture of themselves with the application.

Scholarships will be awarded in March 2026 and **the decisions of CUPE Newfoundland Labrador will be final**. CUPE Newfoundland Labrador assumes no responsibility for applications or supporting documents lost, misdirected, or otherwise not received by the deadline. It is the applicant's sole responsibility to ensure that the application is made correctly, legibly and received by the deadline date. **Late submissions will not be considered.**

### Confidentiality

Member data is highly confidential and must be treated as such. CUPE Newfoundland Labrador confirms that they will always keep confidential the affairs of the membership. The name and picture of the successful applicant may be published in official publications and/or web site of CUPE Newfoundland Labrador and Higgins Insurance.

### Application Submission

**Applications with all supporting documents are to be mailed or emailed to:**

CUPE Newfoundland and Labrador  
15 International Place, Suite 102  
St. John's, NL A1A 0L4  
Email: [cfroude@cupe.ca](mailto:cfroude@cupe.ca)

### Inquiries

All inquiries regarding the scholarship should be directed to Sherry Hillier, President CUPE NL, at 709-753-0732 or via email at [sherryh@cupe.ca](mailto:sherryh@cupe.ca).



## CUPE NL and Higgins Insurance 2026 Scholarship Application Form

### Section A: Applicant Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of the post-secondary institution you will be attending: \_\_\_\_\_

What degree or diploma do you plan to attain? \_\_\_\_\_

What academic year are you entering?  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  4<sup>th</sup>  Other

If other, please explain: \_\_\_\_\_

### Section B: Applicant Documentation

1. Current cover letter and résumé describing your involvement in unpaid volunteerism and/or social activism activities within your school and community, including length of service and time commitment.

Attached

2. A reference letter completed by an individual who is familiar with your volunteer or social activism activities, who is not a relative, including their full contact information.

Attached

I certify that the foregoing statements and information are complete and accurate to the best of my knowledge. I hereby authorize CUPE Newfoundland and Labrador to verify any information provided in this application and grant permission to publish my name and photograph in CUPE Newfoundland and Labrador newsletters and on its website and social media platforms.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## CUPE NL and Higgins Insurance 2026 Scholarship Application Form

### Section C: CUPE NL Member Information

I certify that the foregoing statements and information is complete to the best of my knowledge and hereby give authorization to CUPE Newfoundland Labrador to verify any information given on this application.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

CUPE Local Number: \_\_\_\_\_ CUPE Sector and Classification: \_\_\_\_\_

Member's relationship to the applicant, if applicable: \_\_\_\_\_

Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_