APPLICATION FORM #2047

COMMUNITY OUTREACH

District Name:	District Number:

Bargaining Unit:
Amount of funding you are applying for:

Outline the program, activity or event being planned, including the number of expected participants and other relevant particulars.

Purpose of Requested Funds*

***Outline the approximate planned expenditures related to the program, activity or event.**

Signatures and Date
Bargaining Unit President(s):
District President (if applicable):
Date:

Forward FULLY COMPLETED #2047 Application Form to Gary Fenn, Director, Communications/Political Action by email Gary.Fenn@osstf.ca

SAVE PRINT