**IUOE Local 942 Education Fund**

**Application for Education/Wellness**

**Send To: Email: iuoe942edfund@gmail.com or Fax: 902-566-1425**

**PHOTOS OF APPLICATIONS WILL NOT BE ACCEPTED**

**This section is for Committee use only:**

Date Rec’d: \_\_\_\_\_\_\_\_\_\_\_\_ Info Rec’d: \_\_\_\_\_ Receipt Rec’d: \_\_\_\_\_ Seq #: \_\_\_\_\_\_\_\_\_ Cheque #: \_\_\_\_\_\_\_\_

Approved: \_\_\_\_\_\_\_\_\_\_\_\_ Not Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Incomplete or** **Illegible Applications will NOT be reviewed or processed. You will NOT be contacted for missing information. Please ensure all information is provided as requested\*\***

|  |  |  |
| --- | --- | --- |
| 1.  |  Name of Applicant:  |  Employee #  |
| Telephone #: Email: |
| Address of Worksite & Dept: (Please insure accuracy as this is where your payment will be delivered to, therefore, it must be a location HPEI Courier Mail delivers to). Dept: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Worksite: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Current Position:  | Perm: □  | Temp: □  |
| Casual: □ If Casual, date of last shift worked?  |

**\*\*Workshop/Training/Wellness information MUST be included with application\*\***

|  |  |
| --- | --- |
| 2.  |  Name of Workshop/Training/Wellness:  |
| Location of Workshop/Training/Wellness:  |
| Date of Workshop/Training/Wellness (if Wellness, what period is it for?):  |
| 3.  |  Explain your reason(s) for requesting the Workshop/Training/Wellness:  |
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Revised March 2024 Page **1** of **2**

# IUOE Local 942 Education/Wellness Fund

|  |  |
| --- | --- |
| 4.  | List the cost of attending the Workshop/Training/Wellness  |
| Registration/Tuition Fee/Subscription/Membership including taxes (attach copy of Registration/Subscription/Membership form)  |   |
| Course material including taxes (attach copy of course material, textbooks, etc)   |   |

**For Out-of-Province Travel ONLY (Travel within PEI is NOT covered)**

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| --- | --- |
| a. Accommodations (if sharing, list only the expenses YOU will incur) $ \_\_\_\_\_\_\_ / night for \_\_\_\_\_\_\_ nights =  |   |
| b. Travel:  i) Actual fare: bus, air, ferry, etc.  |   |
|  ii) Number of approved kilometres travelled calculated from your worksite. The rate of reimbursement shall be per Treasury Board Policy.  # of kms \_\_\_\_\_\_\_ x current rate $\_\_\_\_\_\_\_ =  |   |
| c. Meals in accordance with Collective Agreement:   |   |
| d. Miscellaneous: parking, bridge & road tolls, etc. (receipts required)   |   |
|  Total Direct Cost:  |   |
|  Total Amount Requested. \* Maximum $1500/fiscal year:  |   |

**Salary Replacement Cost ~ Max 15 hrs/year applies only if you are scheduled to work on these dates.**

|  |
| --- |
|  Date: # of hours x hourly rate $ =  |
|  Date: # of hours x hourly rate $ =  |

**PLEASE NOTE THE FOLLOWING:**

1. Incomplete or illegible applications will NOT be reviewed or processed;
2. Applicants must submit receipt(s) following completion of the above Workshop/Training/Wellness before any further applications will be approved;
3. Applications must be received by the first of each month to be reviewed by the Committee that month. The Committee generally meets on the third Tuesday of every month;
4. If approved for funding, it is your responsibility to notify the employer and complete the appropriate leave forms; If the course is cancelled or you do not attend, ALL funding must be returned immediately;
5. Any cheques received must be cashed within **6 months** of the date of issue. If not, they will be null/void and they will **NOT** be reissued to the Member.

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| --- | --- |
| Date:  | Applicant’s Signature:  |

Revised March 2024 Page **2** of **2**

**IUOE Local 942 Education Fund Committee**
**Employee Guidelines for Application**

Fiscal Year April 1 – March 31

**Background:** The IUOE Local 942 Education Fund was implemented April 1, 2001 as part of the Collective Agreement signed February 5, 2001 between the Regional Health Authorities and IUOE Local 942. The fund is available only to those members of IUOE Local 942 covered by their Collective Agreement (Article #27). In the Collective Agreement, provisions were made for the establishment of a Joint Committee to allocate and administer the monies. The IUOE Local 942 Education Fund Committee consists of three representatives of IUOE and three representatives of the Employer. The guidelines are established by the Committee, reviewed annually and if necessary, amended to reflect the funds experience during the previous year.

**Application Routing:** Send application to: Email: iuoe942edfund@gmail.com or Fax to 902-566-1425.

**Guidelines for Application**

* Applicants must have paid dues within the last 12 months of application review meeting date. Requests from members on an approved leave from the employer will have their applications reviewed on a case by case basis.
* Applications must be received prior to the first of each month. The Education Fund Committee generally meets on the third Tuesday of each month.
* Funding for workshops/training outside of PEI may be considered.
* Each application will be reviewed. Approval and denial is at the discretion of the committee. Applications will be processed throughout the fiscal year or until the fund allocation for the year has been depleted.
* Applicants may be approved for costs to a maximum of $1500 and for salary replacement costs up to 15 hours.
* Up to $250 of the $1500 may be considered for use towards personal wellness based on approval by the Committee per fiscal year.
* In rendering its decision, the Committee may take into account previous applications.
* The Committee reserves the right to adjust Salary Replacement costs based on fund usage. Applications received 90 days past the end date of the education will not be considered.

***Completion of application form: All pertinent information must be provided including copies of program brochure, registration form and any out-of-province travel and accommodation estimates.***

Revised March 2024 Page **1** of **2**

***IUOE Local 942 Education Fund Employee Guidelines for Application***

**Post Approval of Application:**

* Receipts must be submitted upon completion of the education on approved applications. The following receipts are required:
	+ Registration or tuition fees
	+ Course material
	+ Accommodations
	+ Travel (actual fare, eg: bus, air, ferry, bridge, road tolls, taxi, etc.) No receipts are required for mileage (approved kms) or meals based on per diems. **All required receipts must be submitted before future funding will be considered.**

**Expenses:**

* The following will be considered for **Out-of-Province ONLY**: Accommodations (best value rates such as government, convention) Travel:
	+ Travel (actual fare, eg: bus, air, ferry, etc.)
	+ Number of approved kilometres travelled shall be calculated from your worksite. The rate of reimbursement shall be per Treasury Board Policy
	+ Meals in accordance with Collective Agreement Article
	+ Miscellaneous (parking, bridge and road tolls, taxi, etc.)

**Salary Replacement Costs:**

* Salary replacement is available to all IUOE members up to a maximum of 15 hours per fiscal year. Members must complete the Health PEI Leave of Absence form. The Approval slip from the Education Fund Committee must be attached and submitted as per your department procedure.
* The Employer pays the applicant for the number of hours stated in the letter of approval and invoices IUOE Local 942.
* Salary Replacement does not cover time of travel to training/workshop etc.

**Re-application:**

* Once an application has been approved, any additions or changes to that application shall not be considered. **However, a new application may be submitted for any additional charges**.

Revised March 2024 Page **2** of **2**

**IUOE Local 942 Education Fund Committee**

**Criteria for Approval and Denial of Funding**

Criteria for APPROVAL of Funding:

* + Education related to current occupation/position
	+ Education related to occupation/position in the Health sector
	+ Attendance at conferences/meetings with education components
	+ Education programs from a recognized/accredited service provider
	+ Education toward personal career goals within Health and Wellness
	+ Education/Training/Activity towards personal Wellness
	+ Course equivalency exams or Challenge exams

Reasons for DENIAL of funding:

* + Education/training is required by the Employer
	+ Equipment, food, supplements for personal Wellness
	+ Annual professional memberships or association dues
	+ Failure to provide receipts from previous funding
	+ Information regarding the request is not provided at time of review and/or application is incomplete or not legible.
	+ Meetings, workshops, training or events that are purely ideological in nature
	+ Provider is not a recognized/accredited service provider

**Final decisions will be made at the discretion of the Committee based on the application provided.**

Revised March 2024 Page **1** of **1**

**IUOE LOCAL 942 Education Fund Committee**

**Terms of Reference**

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| **PURPOSE:**  **MEMBERSHIP:**  **CHAIR:**  **RECORDER:**  **MEETINGS:**  **QUORUM:**  **EVALUATION:**  **RECORDS:** **FISCAL YEAR:**  | The purpose of the Committee shall be the allocation and administration of the specified monies designated in Article 27 of the Collective Agreement between Health PEI and IUOE Local 942 Union. The Committee shall consist of no less than three (3) members representing the Union; three (3) members representing the Employer of which these positions are appointed by the respected parties. Members shall serve a three (3) year term which may be renewed. The IUOE Chair shall ensure that all new committee members receive an orientation package. The Education Fund Coordinator shall act as Chair at the monthly meetings. The Chair shall provide all pertinent documentation required for the meetings. The Recorder, selected at the previous meeting, shall alternate between the Parties on a monthly basis. The Recorder shall forward minutes prior to the next meeting. The Committee shall meet to review and process applications for funding. Minutes of all meetings shall be recorded and copies distributed to committee members. Meetings will be set monthly or as required. Processing of applications can proceed with at least one (1) representative from each Party. Decisions will be made by consensus whenever possible and by majority vote when necessary. Voting requires equal amount of representation from each party. A tie vote application remains on hold until consensus is met through further discussions. The Committee shall be responsible for reviewing and evaluating the Terms of Reference, Criteria for Approval and Denial of Funding, Application form and Approval Letter. Such review shall be conducted annually or as otherwise determined by the Committee. The Committee shall ensure that the IUOE Local 942 Education Fund coordinator maintains records pertinent to the allocation of monies. The IUOE Local 942 will audit the fund as part of its operating procedures. A report shall be compiled annually and shall be available to each of the Parties. The fiscal year shall be April 1 – March 31. |

Revised March 2024 Page **1** of **1**