



Graduate Students' Association

Local 78, Canadian Federation of Students

600 Unicentre
Carleton University

tel (613) 520-6616
fax (613) 520-3680
gsa@gsacarleton.ca
gsacarleton.ca

GSA FAMILY LEAVE GRANT APPLICATION FORM

Funded and Administered by GSA Carleton Inc.

Please print legibly!

SURNAME GIVEN NAME
STUDENT #
DEPARTMENT DEGREE PROGRAM
LOCAL STREET ADDRESS
CITY POSTAL CODE
PHONE ALTERNATE PHONE
EMAIL ADDRESS

THIS BOX FOR OFFICE USE ONLY:

| | | | |
|-----------------------|------------------------------|-------------------------------|-------------------------------|
| NAME | | FG19- | |
| | | | |
| CONTACT DATE | METHOD | COMMENTS | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| DATE RECEIVED | REVIEWED BY OA / DATE | REVIEWED BY VPF / DATE | DECISION: YES NO |
| AMOUNT AWARDED | COMMENTS | | REQUISITION # |

GSA FAMILY LEAVE GRANT APPLICATION_

The GSA Family Leave Grant is designed to provide financial support for full-time and part-time Masters and PhD students who require academic leave for parental leave or other family related issues. Only those students that were granted academic leave for parental/family related issues are eligible to apply for the Family Leave Grant. To be considered for the grant, applicants must demonstrate financial need, and proof of registration for two terms prior to the start of the leave.

The GSA Family Leave Grant is for a one-time amount of \$1,500.

- Applications will not be processed until all required documentation has been received. Photocopies are acceptable, since documentation will not be returned.
- Students will be deemed ineligible for this grant where:
 - They are receiving Tri-Council paid parental leave.
 - They are receiving CUPE 4600 paid parental leave.
 - They are receiving Employment Insurance maternity or parental leave benefits.
 - They have previously received this grant or a GSA Emergency Grant **for the same family related purpose.**
 - They cannot demonstrate financial need.
- The complete rules and regulations governing this grant are available on request.

You must provide the following documentation:

**Check if
Attache
d**

| DOCUMENTATION | Check if Attache d |
|--|-----------------------------------|
| A completed and signed copy of this application form. | [] |
| Written approval of request for family leave by the student's department and the Faculty of Graduate and Postdoctoral Affairs. | [] |
| Proof of registration for two terms prior to the start of the leave. | [] |
| Any relevant documentation pertaining to the request for family leave. | [] |

PERSONAL BUDGET

| EXPENSES | REVENUE |
|--------------------------------|-------------------------------|
| <i>Estimated per semester</i> | <i>Estimated per semester</i> |
| Tuition Fees \$ _____ | Savings \$ _____ |
| Books & Supplies \$ _____ | TA/RA/Sessional \$ _____ |
| Rent \$ _____ | Tri-Council Aid \$ _____ |
| Food \$ _____ | EI Benefits \$ _____ |
| Clothing \$ _____ | CUPE 4600 Aid \$ _____ |
| Transportation \$ _____ | Fellowships \$ _____ |
| Other Expenses \$ _____ | Scholarships \$ _____ |
| TOTAL EXPENSES \$ _____ | OSAP/Other Loans \$ _____ |
| | Other Revenue \$ _____ |
| DETAILS OF THE EXPENSES | TOTAL REVENUE \$ _____ |
| | DETAILS OF THE FUNDING |
| | |

****include partner/spousal revenue, if applicable**

CIRCUMSTANCES AND PROPOSED USE OF THE FAMILY LEAVE GRANT

Please provide a detailed explanation

