



**SECTION B: Employer Information**

**10** *Employer (please check one):*

- |  |                                   |                                     |
|--|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Vancouver Coastal | <input type="checkbox"/> Fraser   | <input type="checkbox"/> Northern   |
| <input type="checkbox"/> Vancouver Island  | <input type="checkbox"/> Interior | <input type="checkbox"/> Provincial |
| <input type="checkbox"/> Affiliate         |                                   |                                     |

**11** *Work site:* \_\_\_\_\_

**SECTION C: Course/Program Information**

**12** *Name of School*

**13** *Location*

**14** *Course Name (and Number)*

**15** *Course Hours per Week*

**SECTION D: Reason for Appeal**

*Please explain briefly and clearly why you disagree with this decision:*

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**Freedom of Information and Protection of Privacy  
Declaration for Funding Application**

***Declaration*** *(Important: read and sign):*

I declare that the information that I have provided in this Application Appeal Form is, to the best of my knowledge, correct and complete.

**I understand that:** the information I have provided will be used to determine my eligibility for funding from the FBA Education Fund.

**I agree that:** by signing below I give permission for the exchange of information between the FBA Education Fund Appeal Committee, FBA Education Fund staff, my employer, educational institutions, and other funding sources for the sole purpose of verifying and/or investigating information in this appeal application and related documents.

***Collection and Use of the Information:***

The personal information on this form will only be used for two (2) purposes:

- to determine eligibility for funding by the FBA Education Fund, and
- to gather statistics for use in reports (for example: the number of denied applications, the number of appeals and results, etc.)

*Signature of Applicant:* \_\_\_\_\_

*Print Name:* \_\_\_\_\_

*Date Signed:* \_\_\_\_\_

**SECTION F: Checklist**

- Are all parts of the form complete?
- Have you signed the form?
- Copy of denial letter attached?

*Send the form to:*

**FBA Education Fund  
c/o 5000 North Fraser Way  
Burnaby, B.C. V5J 5M3**