

PERSONAL INFORMATION



Adult Learner Bursary Info & Application

SUBMISSION DEADLINE IS MARCH 31st. MAIL IN OR DROP OFF AT BRANCH. LATE SUBMISSIONS WILL NOT BE CONSIDERED.

Union Bay Credit Union may award seven bursaries in the amount of \$750 each to a total of \$5,250 annually, to members pursuing further education.

CRITERIA:

The applicants, or their parents or guardians, must be active members of Union Bay Credit Union for at least the previous six months. The successful applicants will be selected on a basis of involvement in their school and/or community, school achievement and financial need. We accept one application per member per year.

Bursaries must be claimed within two years of being awarded. Bursary monies will be directed to the post-secondary institutions upon verification of enrollment.

Surname:	First Name:		
Union Bay Credit Union Account Number:			
Mailing Address:			
City:	Postal Code:		
Phone #:	Cell #:		
Email Address:			
CAREER GOALS & FINANCIAL INFORMATION			
Program enrolled in:	Institution:		
Start date:	Duration of program:		
FINANCIAL INFORMATION			
Personal Net Income:	Spouse/Partner Net Income:		
Personal Savings:	Parent's Contribution:		
Other (Gov't, WCB, Band):	Awards or Scholarships:		
Have you received a Union Bay Credit Union bursary in any previous year? Yes No			





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EXPENSES			
LAFLINGES			
Tuition:			
Fees (student services, insurance, etc.			
Room, board & utilities:			
Clothing:			
Entertainment: Personal sundries:			
Transportation:			
Miscellaneous:			
TOTAL EXPENSES			
TOTAL NEEDS (-) SURPLUS (+) (Total income	minus totai expenses)		
COMMUNITY & VOLUNTEER ACTIV	/ITIES		
List any community or volunteer activities	in which you participate:		
	Willen you participate.		
DEDCOMAL CIDOUMCTANICEC			
PERSONAL CIRCUMSTANCES			
Statement of personal circumstances:			
APPLICANT'S STATEMENT			
I declare the information provided herein is t application is subject to verification.	rue and correct. I understa	and the information prov	ided on this
Signature of Applicant:		Date:	
Mail to: LIBCLI BLIDSARV ADDITICATION BOY 15			DACE 2 OF 2