



2024 Bursary Application Form

Bursaries, valued at \$500 each, will be awarded by OMISTA Credit Union. **Bursary Recipients will be announced during the week of June 17th, 2024*.**

Eligibility:

- Student must be in full-time attendance at an accredited university, community college, or certified program in Canada as of October 31, 2024.
- Student must be an OMISTA Credit Union customer, child, or grandchild of an OMISTA customer.
- Student must display a financial need.
- Student may be entering any year of study.
- No age restriction.
- Bursary recipients must become a customer of OMISTA Credit Union by August 16th, 2024.

All information must be complete AND documented marks for last three years must be attached or the application will NOT be considered.

Please include with your application, a photo of yourself that may be displayed on our OMISTA website and social channels if you are selected.

Deadline for receipt of Applications is Friday, 5:00 PM, May 10th, 2024.

Submit Applications:

By Mail or in Person: OMISTA Credit Union Bursary – Attention: Deanna LeBlanc

151 Cornhill Street
Moncton, NB
E1C 6Ls

1192 Mountain Rd. Unit 1
Moncton, NB
E1C 2T6

444 Aberdeen Street
Fredericton, NB
E3B 1B6

2 Gateway Dr. Unit 6
Oromocto, NB
E2V 4S3

By Email: Scanned, signed copies of the application and the 3 years of marks to dleblanc@omista.com

For more information, please contact:

Deanna LeBlanc
OMISTA Credit Union
1192 Mountain Road
Moncton, NB E1C 2T6
Ph: (506) 857-2048
Fx: (506) 859-7697
dleblanc@omista.com
www.omista.com

*Funds will be made available November 2024

OMISTA Bursary Application Form

1. Name of applicant _____

2. Date of birth _____

3. Social Insurance No. _____

4. Home address _____ Mail address (if different) _____

5. Telephone numbers: (h) _____ (c) _____

6. Email address _____

(By applying for this bursary, you agree to future communications from OMISTA Credit Union)

7. Are you an OMISTA Credit Union customer? Yes No

(if yes, please complete below)

Account Number _____ Since when? _____

8. Are your parent/guardian/grandparent an OMISTA Credit Union customer? Yes No

(if yes, please complete below)

Name(s) of parent(s), guardian(s) or grandparent(s)

Account Number _____ Since when? _____

Address _____

Telephone numbers: (h) _____ (c) _____

9. Course you plan to follow _____

10. Have you been accepted at this university or college? Yes No

(if yes, a copy of acceptance letter **MUST** be attached)

11. Describe your Career objective _____



OMISTA

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12. Please **attach a transcript of your marks for the last three years**

Name of current school you are attending _____

Name of Principal/Dean of the school you are attending _____

Telephone number: _____

13. Describe any involvement or activities in which you have participated in

School Committees/Involvement _____

Community Involvement _____

Extra-curricular Activities _____

Sports _____

14. Please explain why you feel you should receive an OMISTA Credit Union Bursary

15. Please detail any information you feel OMISTA should consider when reviewing application

16. Please list any other bursaries or scholarships you have been awarded:

_____	_____
Name of scholarship/bursary	Amount
_____	_____
Name of scholarship/bursary	Amount
_____	_____
Name of scholarship/bursary	Amount

17. Proposed budget for coming academic year (income and expenses):

Sources of Funds	Use of Funds
Personal Savings \$ _____	Tuition Fees \$ _____
Employment Savings _____	Books & Supplies _____
Family Contributions _____	Room & Board _____
Other bursaries/scholarships _____	Transportation _____
RESP's/Student Loans _____	Other expenses (specify) _____
NB Tuition Grant _____	_____
Other funds (specify) _____	_____
Total Funds \$ _____	Total Expenses \$ _____

Will you be living: at home in residence boarding in an apartment

18. **References:** Please list the names of three individuals whom OMISTA may contact. You may include teachers, employers, clergy, OMISTA Credit Union staff or directors, or other responsible persons. Do NOT include family members.

(1) _____

Name	Address
_____	_____
Occupation	Telephone Number
_____	_____

(2) _____

Name	Address
_____	_____
Occupation	Telephone Number
_____	_____

(3) _____

Name	Address
_____	_____
Occupation	Telephone Number
_____	_____

Applicant's signature

Date



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Household Information

This page containing family information **MUST** be completed to be considered for a bursary. Information will be kept in strict confidence and destroyed once the bursaries have been awarded.

Mature students, who have been out of high school a minimum of four years, may claim independent financial status.

1 Re: Name of applicant: _____
(Student name)

2 Annual household income for 2023:

Employment/Business income (gross)	\$ _____
Pensions	_____
Allowances	_____
Other	_____
Total household income	\$ _____

3 Number of persons in household:

Parents	_____
Children	_____
Other	_____

4 How many contribute to the household income? _____

5 How many are supported by this income? _____

6 Are there household members, other than the applicant, currently attending post-secondary educational institutions? Yes, number: _____ No

7 Please explain any special family circumstances i.e., support for children who do not live in your home, up-coming retirements, income changes etc.

The information stated in this application is true and accurate to the best of my knowledge. I understand that if any portion of this application is incomplete, including the requested transcript of marks for the previous 3 years, it will not be considered.

Signature of parent/guardian/mature student

Date