Victoria Inn Bursary

Value: $400
Number: One
Field of Study: Open to all programs
Qualifications:

1) is a staff member of the Victoria Inn or is a sibling of a Victoria Inn staff member (Priority in selection will be given to Victoria Inn staff members);

2) is enrolled full-time in any Faculty or School (including University 1) at The University of Manitoba;

3) as an entering student, achieved a minimum high school average of 70% on courses used for admission purposes (students admitted with mature student status will be considered eligible) or, as a continuing student, has achieved a minimum cumulative grade point average of 2.0;

4) demonstrates financial need on the standard University of Manitoba bursary application (see application for details).

Applicants for this award are required to submit proof of Victoria Inn employment.

Submit complete applications by mail or in person to:
Financial Aid and Awards Office
422 University Centre, University of Manitoba,
Winnipeg, Manitoba R3T 2N2

Deadline: October 1

In years when October 1 falls on a weekend, applications will be accepted until the end of the following business day.
AWARD APPLICATION

Victoria Inn Bursary

An annual bursary of $275 is offered to a student who:

1) is a staff member of the Victoria Inn or is a sibling of a Victoria Inn staff member (Priority in selection will be given to Victoria Inn staff members);

2) is enrolled full-time in any Faculty or School (including University 1) at The University of Manitoba;

3) as an entering student, achieved a minimum high school average of 70% on courses used for admission purposes (students admitted with mature student status will be considered eligible) or, as a continuing student, has achieved a minimum cumulative grade point average of 2.0;

4) demonstrates financial need on the University of Manitoba bursary application.

Please complete this application and ensure you have completed the online University of Manitoba bursary application:

Name: ___________________________________________ Student # ________________________

Name of Victoria Inn Employee: ________________________________________________________

Relationship to Employee (self or sibling): ________________________________________________

Please have the employee’s direct supervisor at the Victoria Inn complete the following section confirming employment:

Signature of Supervisor: ________________________________________________________________

Name, title and telephone number of Supervisor (please print):

__________________________________________________________________________________

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