

Bursary Application Form For the 2026-2027 School Year



- FATHER/GUARDIAN 1

First Name

Last Name

Street Address

City/Province

Postal Code

Phone Number

Email

☐ is fully financially responsible for the student(s) enrolled at MBCI

☐ is partially financially responsible for the student(s) enrolled at MBCI (_____ %)

Are you an official member of a Manitoba Mennonite Brethren Church (as of August 1, 2026) ☐ Yes ☐ No

Name of church _____

- MOTHER/GUARDIAN 2

First Name

Last Name

Street Address

City/Province

Postal Code

Phone Number

Email

☐ is fully financially responsible for the student(s) enrolled at MBCI

☐ is partially financially responsible for the student(s) enrolled at MBCI (_____ %)

Are you an official member of a Manitoba Mennonite Brethren Church (as of August 1, 2026) ☐ Yes ☐ No

Name of church _____

- OTHER GUARDIAN — Please describe _____

First Name

Last Name

Street Address

City/Province

Postal Code

Phone Number

Email

☐ is fully financially responsible for the student(s) enrolled at MBCI

☐ is partially financially responsible for the student(s) enrolled at MBCI (_____ %)

- **NUMBER OF PEOPLE RESIDING IN THE HOME** _____
(including extended family members, boarders, etc.)

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR EVERYONE LIVING IN YOUR HOME

First Name	Last Name	School Attending in 2026-2027	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please describe the financial challenges you face? What implications do these challenges have?

How do you expect your financial situation might change in the next year?

- **FINANCIAL INFORMATION**

Please list **ALL** of your sources of income: employment, employment insurance, self-employment including cash earnings, tips, child support, childcare/babysitting, RRSP home buyers plan proceeds, Canada Child Benefit, GST Credit, Worker's Compensation benefits, CFS foster care subsidies, financial support from other family and friends, rent, pension, investment and any other income.

Income Father/Guardian 1

Employer Name(s): _____ _____	Job title(s): _____ _____	
Gross Income (line 15000 from 2025 T1) \$ _____	Net Income (line 23600 from 2025 T1) \$ _____	Tax Payable (line 43500 from 2025 T1) \$ _____
Child Benefit Payment Monthly Annually	GST Credit Payment Quarterly Annually	Self-Employment Income
\$ _____	\$ _____	\$ _____
Other Income \$ _____ Type: _____	Other Income \$ _____ Type: _____	

Income Mother/Guardian 2

Employer Name(s): _____ _____	Job title(s): _____ _____	
Gross Income (line 15000 from 2025 T1) \$ _____	Net Income (line 23600 from 2025 T1) \$ _____	Tax Payable (line 43500 from 2025 T1) \$ _____
Child Benefit Payment Monthly Annually	GST Credit Payment Quarterly Annually	Self-Employment Income
\$ _____	\$ _____	\$ _____
Other Income \$ _____ Type: _____	Other Income \$ _____ Type: _____	

Income Other Guardian

Employer Names: _____ _____	Job title(s): _____ _____	
Gross Income (line 15000 from 2025 T1) \$ _____	Net Income (line 23600 from 2025 T1) \$ _____	Tax Payable (line 43500 from 2025 T1) \$ _____
Child Benefit Payment Monthly Annually	GST Credit Payment Quarterly Annually	Self-Employment Income
\$ _____	\$ _____	\$ _____
Other Income \$ _____ Type: _____	Other Income \$ _____ Type: _____	

• **ASSETS & LIABILITIES:** Describe and provide a value for each of your assets and liabilities.

Home

☐ Own ☐ Rent

Purchase Date

Purchase Price

\$ _____

Current Fair Market Value

\$ _____

Mortgage Balance

\$ _____

Mortgage or Rent Payment

\$ _____

Frequency of Payment:

Weekly

Semi Monthly

Bi-weekly

Monthly

Second Home/Cottage

Purchase Date

Purchase Price

\$ _____

Current Fair Market Value

\$ _____

Mortgage Balance

\$ _____

Mortgage or Rent Payment

\$ _____

Frequency of Payment:

Weekly

Semi Monthly

Bi-weekly

Monthly

Rental Property

Purchase Date

Purchase Price

\$ _____

Current Fair Market Value

\$ _____

Mortgage Balance

\$ _____

Mortgage Payment

\$ _____

Frequency of Payment:

Weekly

Semi Monthly

Bi-weekly

Monthly

Vehicle 1

Purchase Date

Year

Make

Model

Purchase Price

\$ _____

Balance Outstanding

\$ _____

Payment

\$ _____

Weekly

Semi Monthly

Bi-weekly

Monthly

Vehicle 2

Purchase Date

Year

Make

Model

Purchase Price

\$ _____

Balance Outstanding

\$ _____

Payment

\$ _____

Weekly

Semi Monthly

Bi-weekly

Monthly

Recreational Vehicles (Total Value of RV/Trailer, Boat, Motorcycle, Snowmobile, etc.)

\$ _____

Make _____

Model _____

Investments

RRSP Funds

\$ _____

RESP Funds

\$ _____

Any other savings or investments

\$ _____

Debts/Liabilities

Line of Credit

\$ _____

Credit Card Balance(s)

\$ _____

Other Liabilities

\$ _____

• CONTACT FOR THIS APPLICATION

First Name

Email

Last Name

Phone Number

PROCESS:

A complete application must include the following documents (failure to do so will result in delays):

- **Current pay stub(s)**
- **2025 T1 Notice of Assessment from the Canada Revenue Agency**
- **2025 T2125 Statement of Business or Professional Activities for self-employed earnings(if applicable)**

Your application and supporting documents can be emailed to bursary@mbci.mb.ca, dropped off at the school office or mailed to MBCI, 173 Talbot Avenue, Winnipeg, MB R2L 0P6.

Once all documents are received, we will contact you to acknowledge receipt and to arrange an interview, if/as needed.

MBCI reserves the right to request any other documents such as mortgage statements, rent receipts, bank statements, etc. in order to substantiate claims made on this application.

All information is held in the strictest of confidence and is only utilized in assessing the applicant's need for bursary funding.

I/We hereby certify that the above information fully discloses all of my/our sources of income, assets and liabilities.

I/We understand that failure to fully disclose all of my/our financial information may disqualify me/us for bursary funding.

Father/Guardian 1

First & Last Name

Signature

Date

Mother/Guardian 2

First & Last Name

Signature

Date

Other Guardian

First & Last Name

Signature

Date
