

TELL US  
YOUR  
STORY

SCHOLARSHIP

**Introduction:**

As a locally owned organization, Access Credit Union cares deeply about giving back to the communities it serves. Our organization supports various community, youth and educational initiatives through donations, sponsorships and volunteering. Access recognizes the value of post-secondary education and what continued learning means for the progress and development of individuals and local communities.

**Purpose:**

The 2025 Access Credit Union "***Tell us Your Story***" Scholarship Program is designed to reward students who align with our values of integrity, service, innovation, and opportunity. Scholarships are awarded on the basis of applicant character and values.

**Support:**

Access Credit Union will award three \$5,000 awards and four \$2,500 awards for a total of \$25,000 in 2025.

**Eligibility Criteria:**

- Applicants must reside in Manitoba.
- Applicants must currently attend high school full-time (be it public school, private school, or home school) and be eligible to graduate in June of the current year.
- Applicants must plan to continue their education at a recognized post-secondary institution and provide proof of enrollment or confirmation of classes by December 1st, 2025.

**APPLICATION:**

Applicants are required to complete all sections of the application form. No other form, size or type will be considered. Applications must be emailed by the deadline to:

[community@accesscu.ca](mailto:community@accesscu.ca)

All applicants who follow the outlined process and who meet the eligibility criteria will be considered.

**AWARD:**

A cheque for the scholarship amount will be awarded to the recipient upon proof of paid registration at a recognized post-secondary institution.

**Deadlines:**

Open: **Monday, March 24, 2025**

Closed: **Wednesday, April 30, 2025**

## Part I 2025 Access Credit Union "Tell us Your Story" Scholarship

Name Surname Given Name(s)

Address Apt.

City Postal Code

Telephone E-mail

Enrolled at (Name of High School)

Do you have a parent/guardian that is an employee of Access Credit Union or Brio Insurance?

If yes, please provide their first and last name:

## Part II

1. Academic Achievement: Submit your most recent transcript.
2. Tell us more about yourself (Volunteer Work, Academic Success, Extracurricular Activities, Future Goals, etc).

*Max. 500 characters*

## Part II 2025 Access Credit Union "Tell us Your Story" Scholarship

3. Tell us your story! Through video submission (minimum 1 minute) or alternatively in writing (500-800 words)

***Here are some ideas:***

How have you made a positive impact on someone's life?

What is an experience that has shaped who you are today?

Describe an act of kindness you showed to someone.

Share a difficult or challenging experience and how you've overcome that.

### Part III 2025 Access Credit Union "Tell us Your Story" Scholarship

1. Enclose 1 (one) letter of recommendation.

Date

Applicant's Signature

*Note: Applications received later than **April 30, 2025** will not be considered.*

I/we acknowledge that the Credit Union has adopted policies to protect my/our privacy and that I/we may obtain particulars upon request. Until I/we withdraw my/our consent, I/we hereby consent to the use (by the Credit Union and any of your affiliates or other members of the Canadian Credit Union system) of information provided by me/us or collected about me/ us for any use related to the provision to me/us (whether currently provided or prospective) of services by you or any of your affiliates or other members of the Canadian Credit Union system.

On behalf of myself or the minor Applicant named below, I hereby irrevocably and unconditionally agree and authorize that Access Credit Union Limited may take my/the applicant's photograph (in any format) and use it, along with identifying information, in publicity conducted by Access Credit Union, its advertising agencies, or other related parties, without compensation of any kind. I release Access Credit Union Limited, its advertising agencies, or other third parties, from all liability in connection with the use and display of my photograph, and agree to indemnify and hold them harmless from any claims.

Date

Applicant's Signature

Parent/Guardian Name (please print)

Parent/Guardian Name (please print) (if applicant is under 18 years of age)