
Office: 1.506.454.1220 Toll Free: 1.866.838.6542 Fax: 1.506.454.1221

NB GOVERNMENT EMPLOYEES BURSARY APPLICATION

(Note: Please type your information directly into the text boxes provided.)

Student Name:

Phone #

Desired Program Name:

I certify that I am currently employed by the Province of New Brunswick.

Department of Education.

Department of Family and Community Services.

Post-secondary Education, Training and Labor

Name and Title of Immediate Supervisor:

Immediate Supervisor's Contact Information:

Phone:

Email:

Fax:

***Proof of employment is required prior to the beginning of each term.**

Signature of Applicant: _____

Date:

Signature of Supervisor: _____

Date: