



SHEEPHAVEN

CREDIT UNION LIMITED

At the  of the community

STUDENT BURSARY

2026

The aim of the bursary programme is to give financial assistance to students who are members of Sheephaven Credit Union and who are moving into full time further & higher education & training for the first time.

FOR
€500
x2

You are eligible to be a member of Sheephaven Credit Union if you live in the following areas:

•Carrigart •Downings •Cranford •Glen •Creeslough •Dunfanaghy

APPLICATIONS ARE NOW OPEN

074 915 5866 / 074 913 8765 info@sheephavencu.ie www.sheephavencu.ie

OPERATING RULES: **1.** The Bursary Award Scheme is open to members who joined the credit union before Monday 31st August 2026 **2.** The bursary recipients will be determined by lottery in the presence of an Independent Adjudicator. **3.** Only one application per student is permissible. **4.** Students must show evidence of acceptance on the course. **5.** The award shall be deposited into the recipient's credit union account. **6.** The decision of the Bursary Committee is final and no correspondence will be entered into. **7.** Closing date for completed application forms is Saturday 12th September 2026. **8.** Recipients will be notified by telephone or by email, and will be required to attend any publicity and promotional events arranged by Sheephaven Credit Union.



SHEEPHAVEN CREDIT UNION STUDENT BURSARY

APPLICATION FORM

Account Number:.....

Name:.....

Address:.....

Email:.....

Phone No:.....

Date of Birth:.....

School Attended:.....

Where did you hear about the Bursary Award Scheme?.....

EDUCATIONAL COURSE FOR WHICH YOU ARE SEEKING BURSARY

Course Title:.....

Name of College / University:.....

Date of Commencement at College:.....

Course Duration:.....

(This must be a full time course in college or university)

DECLARATION:

I wish to be considered for the Sheephaven Credit Bursary. I have read, understand and agree to comply with the operating rules of the Sheephaven Credit Union Bursary. I agree to participate in any promotion regarding this bursary.

Signature:.....

Date:.....

Parent Signature:.....

(If student is under 16 years of age)

Return completed application form, no later than Saturday 12th September 2026 to;
The Manager, Sheephaven Credit Union Limited, Carrigart, Co. Donegal or email to Info@sheephavencu.ie