

**Registry of Student Services**

**APPLICATION FOR FINANCIAL ASSISTANCE**

**List of Awards**

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| **Student UWI ID # :** |
| **NAME** | Title | Last Name | First Name | Middle Name(s) |
| **Please list the awards for which you wish to apply:** |
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**PLEASE BE GUIDED BY THE TERMS OF AWARD FOR THE APPLICABLE SCHOLARSHIP**

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| **Application Checklist:** |
| 🞎 Completed and signed application |
| 🞎 2 Letters of Recommendation |
| 🞎 Proof of financial status (to include Payslips, etc.)  |
| 🞎 Resume/Curriculum Vitae |

 

**Registry of Student Services**

**APPLICATION FOR FINANCIAL ASSISTANCE**

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| **Biographic Profile** |
| UWI ID # | Former UWI ID# (if applicable) |
| **NAME** | Title | Last Name/Surname | First Name | Middle Name(s) |
| **Former** **NAME*****(If Applicable)*** | Title | Last Name/Surname | First Name | Middle Name(s) |
| Type of Former Name: Maiden 🞎 (Prior to) Deed Poll 🞎 Other 🞎 Please Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date of Birth**: yyyy / mm / dd** | Sex: Male 🞎 Female 🞎 | Marital Status |
| Country of Birth | Nationality |

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| **Student Contact Information** |
| **Permanent Address** | **Term/Mailing Address (if different)** |
| Apt./Street/P.O. Box\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Apt./Street/P.O. Box \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City/Town | Parish | Country | City/Town | Parish | Country |
| Home Phone | Cellular Phone | Other Phone | E-mail Address |

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| **Other Student Status Declarations** |
| Are you a UWI Staff Member? Yes 🞎 No 🞎 | Are you a dependent of a UWI Staff Member?  Yes 🞎 No 🞎 |
| Disability Yes 🞎 No 🞎 | *Please provide documentation of disability if answer is Yes* |
| Employed: Yes 🞎 No 🞎 | Employer: | Full-time 🞎 Part-time 🞎 |
| Employer’s Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Employer’s Telephone:  ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Employer’s E-mail Address: |

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| **Academic Profile** |
| Year of First Admission (UWI) | OC Site | Programme (BSc, BEd etc.) | State your Major/Option |
| Total # of credits completed: | Course Level/Year:Level1 🞎 2 🞎 3 🞎Year (BEd) 1 🞎 2 🞎 3 🞎 4 🞎 | Country of Responsibility | Expected Date of Graduation |

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| **Parental Information** |
| **Mother/Guardian** (if responsible for you) | **Father/Guardian** (if responsible for you) |
| Name | Name |
| Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Telephone (W) | Telephone (W) |
| Telephone (H) | Telephone (H) |
| Occupation | Occupation |
| Employer | Employer |
| Salary $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in US Dollars)Weekly 🞎 Fortnightly 🞎 Monthly 🞎 Annually 🞎 | Salary $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in US Dollars)Weekly 🞎 Fortnightly 🞎 Monthly 🞎 Annually 🞎 |

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| **Information on Spouse** | **Dependents** |
| Name | Number of Children |
| Address (If Different from Applicant’s Permanent Address)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name | Age |
| Name of Child’s School |
| Name | Age |
| E-mail Address | Name of Child’s School |
| Telephone (H) | Other Dependents? Yes 🞎 No 🞎Please give age of each additional dependent childPlease give relationship and age of other dependents |
| Telephone (W) |
| Occupation |
| Employer |
| Salary $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in US Dollars)Weekly 🞎 Fortnightly 🞎 Monthly 🞎 Annually 🞎 |

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| **Budget Planner** |
| Budget for Academic Year  |
| **Actual Annual Expenses (in USD$ only)** | **Actual Annual Income/Resources (in USD$ only)** |
| Tuition Fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Present Bank Balance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Books and Supplies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Spouse’s Contribution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Accommodation | Family Contribution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  Off Campus \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Contribution From Other Sources \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|   | Proceeds From Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Food \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Awards (e.g. Scholarships, Bursaries) |
| Clothing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name of Award | Value |
| Toiletries \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | a. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Transportation | b. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  To and From the UWI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | c. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  Practicum/field trips \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tuition Loans (e.g. SLB, etc.) | Value |
| Contingencies (Please Specify) | a. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Item | Cost ($) | b. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| a. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Grants |  |
| b. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | a. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| c. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ($) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| d. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Other Income/Resources \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Total Expenses ===================** | **Total Income/Resources ================** |
|  |
| **Shortfall (Subtract Total Expenses from Total Income)** |  |

I affirm that the information provided within this form is correct:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date (yyyy/mm/dd)

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| **Awards and Scholarship Information** |
| Will you apply for transfer to another Campus or programme of study in the upcoming academic year? Yes 🞎 No 🞎 |
| If yes, please specify Campus and Programme of Study: |
| Have you been awarded a UWI Scholarship/Bursary to facilitate study? Yes 🞎 No 🞎If Yes, state name and year(s) of award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Value $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Have you been awarded a non-UWI Scholarship/Bursary to facilitate study at the UWI? Yes 🞎 No 🞎If Yes, state name and year(s) of award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Value $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Declaration of Financial Need** **please be detailed in your self expression of need (300-400 words)** |
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| **Work Experience****Indicate jobs held within last five years (including vacation employment)** |
| **Name of Organisation** | **Position Held** | **From** | **To** | **Salary /month** |
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|  |  | **yyyy / mm / dd** | **yyyy / mm / dd** |  |
|  |  | **yyyy / mm / dd** | **yyyy / mm / dd** |  |
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|  |  | **yyyy / mm / dd** | **yyyy / mm / dd** |  |

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| **Career Objective****State your career goals, and the contribution you will make towards the development of your country, in 200 words:** |
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| **State ALL reason(s) why you are the best candidate to receive a scholarship/bursary from the UWI. (200 words):** |
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| **Please provide details on your community and volunteer activities. This should include the names of all the associations to which you are connected, both within and outside the UWI community.** |
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| **Previous UWI Awards received** |
| **Scholarship/Award** | **Year** | **Amount ($)** |
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