

# THE UNIVERSITY OF THE EST INDIES Open Campus Dominica

## Bernard Dinnard Memorial Fund Application Form

Applications are invited for Bursaries of \$3,000 to be offered by the Bernard Dinnard Memorial Fund to pursue study at The University of the West Indies (UWI) Open Campus Dominica.

#### **Application Requirements**

- 1. The applicant should not be a recipient of any UWI award or scholarship.
- 2. The applicant should not be a member of staff or a dependent of a staff member of The UWI Open Campus Dominica.
- 3. The applicant should have competed at least two (2) Semesters, six (6) level one courses with eighteen (18) credits in a UWI Open Campus undergraduate programme.
- 4. Two (2) Reference Forms must be submitted on behalf of the applicant to the **Bernard Dinnard Memorial Fund, c/o The UWI Open Campus Dominica, Elmshall Road, Roseau**, under confidential cover by January 17, 2020.
- 5. This application form must be submitted to the **Bernard Dinnard Memorial Fund, c/o The UWI Open Campus Dominica, Elmshall Road, Roseau**, under confidential cover, by January 17, 2020.

#### **Recipient Selection**

Bursary recipients will be selected on the basis of academic achievement, demonstrable leadership qualities and community service.

and community service.				
Biographic Profile				
Name:	Programme:			
Student ID:	Gender:			
Date of Birth:	Marital Status:			
Country of Birth:	Nationality:			
Employer Name:	E Employer Address:			
Employer Email:	Employer Telephone:			
	Contact Information			
Permanent Addre ss:				
Mailing Address:				

Email:					
Telephone:					
Academic Information					
JWI Course Complete 3	Academic Year	Grade Awarded			
nowledge. I understand the urrent or future considerati	at falsification of any information on tl on for the Bernard Dinnard Memorial vill be awarded. I understand that my	cation is complete and accurate to the best of his application form disqualifies me from any I Fund. Submission of an application in no wa application will not be considered if it is			
ignature	Name	 			



### Bernard Dinnard Memorial Fund Referee Form

Please give an academic assessment of the applicant and any comments you think may be relevant and which would assist us in our evaluation of the application. Use additional paper if necessary.

Profile of Applicant

	1 Tollie Of	Дрисан	
Name:		Date of Birth:	
I would recomme	nd the award of a Bernard Dinnard	Memorial Fund to the	applicant.
☐ Very Strongly			
☐ Strongly			
☐ With reservation			
☐ I am unable to re	ecommend this application for a gradu	ate scholarship.	
Referee Signature	 Referee Name		 