



## UNIVERSITY OF THE WEST INDIES UNIVERSAL SERVICE FUND ICT SCHOLARSHIP

(Open to Jamaican nationals. Tenable at the Mona Campus to pursue post graduate studies in Information and Communications Technology)

### APPLICANTS MUST COMPLETE ALL SECTIONS

Student ID #:

### SECTION I

(1) NAME	Surname	)	First Name		Middle Name/s
(2) ADDRESS	· · · · · · · · · · · · · · · · · · ·				
	e-mail	address:			
(3) PHONE	Home		Work	Mobile	Fax
(4) DATE OF	BIRTH	(5) COUNTRY (	OF BIRTH	(6) NATIO	DNALITY
year /month	n <b>/</b> day				
(7) GENDER		(8) MARITAL S	TATUS	(9) DEPE	NDENTS
Male 🗆	1	Single 🛛	Separated D	Number:	
Female 🗆	]	Married D	Divorced	Ages:	
(10) Post Gra	aduate Pro	ogramme in whic	ch you have been acc	epted for Aca	demic year 2014/15:
(11) Have yo	u been aw	varded a Scholar	ship or Bursary tena	ble at the U.W	'.I. Yes□ No □
lf ves. s	tate the na	me of Scholarshi	p/Bursary:		
, j, c					

(12) Academic Quali	fications				
Examining Body:	Subjects	Advanced or Ordinary/G.P.		YEAR	GRADE
Cambridge/London/ CXC/CSEC/CAPE		Level Taken	Level Obtained		
		-			
					-
					-
			+ +		
		-	+		-
13) Other Qualificati	ions: [Degrees,	Diplomas or Ce	 rtificates)		
,					
44) Dissos stata bali	the Deet Gr	-ducto program			
14) Please state belo			ne you nave been a	Iccepted to put	Sue and your
proposed area o	of specialization	1:			

## **SECTION II**

#### (15) School/University Record

Years	School/University	Activities

### (16) State your other interest and activities:

### (17) Any Other Information

## **SECTION III**

# (18) References

Name	Address

# SECTION IV

(19) Projected Income and Expenses for Academic Year
A. Employment of Applicant:
<b>B.</b> If <u>not</u> employed, please state you sources of financial support e.g. Mother and/or Father, Guardian,
Spouse, Loan etc.
(20) If source is Mother and/or Father, Guardian, Spouse, please state:
Name:
No. of Dependents:
Age of Dependents:
Place of Employment:
Post Held:
Annual Salary:

## (21) Net Income for Academic Year: (Please complete relevant column)

Parent(s)/Guardian(s)		Applicant and/or Spouse	
Mother	\$	Applicant	\$
Father	\$	Spouse	\$
Other	\$	Other	\$
Total	\$	Total	\$

## (22) Expenses for Academic Year: Parent(s)/guardian(s)

Mortgage	\$
Rent	\$
Dependents=School/University Fees	\$
Other Major Expenses	\$
(Please itemize)	\$
	\$
	\$
	\$
Total	\$

### (23) Expenses for Academic Year: Applicant and/or Spouse

Mortgage	\$
Rent	\$
Dependents=School/University Fees	\$
Other Major Expenses	\$
(Please itemize)	\$
	\$
	\$
	\$
Total	\$

## **SECTION V**

### (24) Supporting Information

Student may provide below any additional information that could support this request for financial assistance.

(25) I certify that the above information is true and correct to the best of my knowledge and belief.

Signature of Applicant.....

Date.....

#### **IMPORTANT NOTE**

1. <u>Any other information</u>

Full details should be given of any involvement in Community life and/or service, and should be certifiable from records. Include memberships of Clubs, etc.