



UNIVERSITY OF TECHNOLOGY, JAMAICA
FINANCIAL AID OFFICE
SCHOLARSHIP APPLICATION FORM

Instruction Sheet

- Please **read the instructions carefully** before completing this form and answer **all** relevant questions. **INCOMPLETE applications will not be processed.**
 - Please indicate ‘N/A’ where the information requested in a section is not applicable to your situation.
 - The application form should be completed in **BLOCK CAPITALS** only.
 - The completed application form should be submitted along with a **copy** of your school ID, **SEMESTER ONE (I) PROGRESS REPORT** for the 2016/17 Academic Year (*returning students*) OR copies of your **CXC/CSEC** and/or **CAPE** results (*new students*).
 - Please attach a copy of a photo ID (School ID, Driver’s Licence, Pass-port etc.)
 - **Please ensure that the awards you list are applicable to your College/Faculty, Programme, Year or any other criterion stipulated on the scholarship listing.**
 - Please note that you are required to provide copies of **all** supporting documents requested, including academic and co-curricular record.
 - Students are allowed to have one (1) award of any value **OR** multiple awards where the sum totals of these award values do not exceed Three Hundred & Fifty Thousand Dollars (\$350,000.00).
 - Where income figures are required, gross amounts should be stated.
 - Students are required to provide information on their participation in **current** on or off-campus **co-curricular activities** as it is **a criterion of each award**. In each case you are required to submit the following:
 - For On-Campus Co-curricular Activities:
A letter from the President/Designate of the Club/Societies certifying membership and/or position held. A letter may also be requested from the Students Union VP Clubs and Societies.
 - For Off-Campus Co-curricular Activities:
A letter of support written by the President/Chairman or Secretary of the Body/Association to which you belong. The letter should state clearly:
 - I. The nature of the Body/Association
 - II. The length and nature of the applicant’s involvement
- N.B. – Check to ensure that the awards listed below are applicable to your faculty, programme, year or any other criterion stipulated in the Scholarship Listing.**



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LIST OF AWARD (S)

| | | | | |
|--|---------------|--------------------------|--------------------|------------------------|
| APPLICANT / UTECH ID#: | | TRN # (Required): | | |
| CAMPUS: Papine[] Western[] Arthur Wint[] Slipe Pen Road [] | | | | |
| NAME | Title: | Last Name: | First Name: | Middle Name(s): |
| PLEASE LIST THE NAME (S) OF AWARD (S) FOR WHICH YOU WISH TO APPLY | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
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| 20. | | | | |



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| 1.0 BIOGRAPHIC PROFILE | | | | | |
|---|------------|--|--|--------------------------|-----------------|
| 1. APPLICANT / UTECH ID# | | | 2. Title: Mr. Mrs. Ms. Miss Other _____ (State) | | |
| 3. NAME | Last Name: | | First Name: | | Middle Name(s): |
| 4. FORMER NAME <i>(If Applicable)</i> | Title: | Last Name: | First Name: | | Middle Name(s): |
| 5. Name Type of Former Name: Maiden <input type="checkbox"/> (Prior to) Deed Poll <input type="checkbox"/> Other <input type="checkbox"/> Please Specify _____ | | | | | |
| 6. Date of Birth: dd / mm / yyyy | | 7. Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> | | 8. Marital Status: _____ | |
| 9. Country of Birth: | | | 10. Nationality: | | |
| 11. Disability: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please State _____ | | 12. Employment Status: | | 13. Employer: | |
| 14. Employer's Address: _____ _____ | | | | | |
| 15. Employer's Telephone: _____ | | | 16. Employers E-mail Address: _____ | | |
| 2.0 CONTACT INFORMATION | | | | | |
| 17. Permanent Address Apt/Street/P.O. Box _____ _____ _____ | | | 20. Term Address (if you reside on Hall please provide full details) Apt/Street/P.O. Box _____ _____ _____ | | |
| City/Town: | Parish: | Country: | | City/Town: | Parish: |
| Country: | City/Town: | Parish: | Country: | | Country: |
| 18. Home Phone: | | 19. Cellular Phone: | | 22. Cellular Phone: | |
| 21. E-mail Address: _____ | | 21. Home Phone: | | 22. Cellular Phone: | |
| 3.0 ACADEMIC PROFILE | | | | | |
| 23. First Faculty of Admission: | | | 24. Present Faculty: | | |
| 25. Programme: | | | 26. State your Major: | | |
| 27. Indicate Your Enrollment Status: Fulltime <input type="checkbox"/> Part-Time <input type="checkbox"/> | | | 28. Year of Study for Academic Year 2017/18: 1 2 3 4 5 | | |
| 29. Have you Transferred from a Community College? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state _____ | | | | | |
| 30. Expected Year of Graduation: _____ | | | 31. Hall of Residence (Residing): | | |
| 32. Have you applied for transfer to another Faculty in the upcoming academic year? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state: Faculty _____ Programme: _____ | | | | | |
| 33. Have you been previously awarded a Scholarship/Bursary tenable at UTech? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes state: Award Name _____ Value \$ _____ | | | | | |



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| 4.0 PARENTAL INFORMATION | | | | |
|--|---------------|--|----------------|--------------|
| Mother/Stepmother/Caregiver (Omit as necessary) | | Father/Stepfather/Caregiver (Omit as necessary) | | |
| 34. Name _____ | | 41. Name _____ | | |
| 35. Address _____ _____ _____ | | 42. Address _____ _____ _____ | | |
| 36. Telephone (C): | | 43. Telephone (C): | | |
| 37. Telephone (H/W): | | 44. Telephone (H/W): | | |
| 38. Occupation: | | 45. Occupation: | | |
| 39. Employer: | | 46. Employer: | | |
| 40. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[] | | 47. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[] | | |
| 5.0 SPOUSAL INFORMATION | | 6.0 DEPENDENT(S) (persons who depend on you) | | |
| 48. Name: | | 56. Name | | 57. Age: |
| 49. Address (If different from Applicant's Permanent Address) _____ _____ _____ | | 58. School | | |
| | | 59. Name | | 60. Age: |
| | | 61. School | | |
| 50. E-mail Address: | | 62. Name | | |
| 51. Telephone (W): | | 63. Age: | | |
| 52. Telephone (H): | | 64. School | | |
| 53. Occupation: | | 65. Other Dependent(s)? Yes [] No [] | | |
| 54. Employer: | | Please Specify _____ _____ _____ | | |
| 55. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[] | | _____ _____ | | |
| 7.0 WORK EXPERIENCE | | | | |
| 66. Indicate jobs held within last five(5) years (including vacation and part-time employment) | | | | |
| Organisation Name | Position Held | From | To | Salary/Month |
| | | dd / mm / yyyy | dd / mm / yyyy | |
| | | dd / mm / yyyy | dd / mm / yyyy | |
| | | dd / mm / yyyy | dd / mm / yyyy | |
| | | dd / mm / yyyy | dd / mm / yyyy | |



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| 8.0 CO-CURRICULAR RECORD | | |
|---|--|--|
| 67. Please indicate the Co-curricula activities in which you are involved: Sports <input type="checkbox"/> Clubs/Societies <input type="checkbox"/> Community Base Activity <input type="checkbox"/> | | |
| <u>CURRENT INVOLVEMENT</u> | | |
| Sports | Clubs/ Societies | Community Activity |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |
| <u>PAST INVOLVEMENT</u> | | |
| Sports | Clubs/ Societies | Community Activity |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |
| Activity Name: | Name: | Name: |
| Competition Entered: | Position Held: | Position Held: |
| Competition Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> | Membership Date: <small>dd / mm / yyyy</small> |



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9.0 ESSAY

68. Explain how this scholarship will be beneficial to you. Your answer, although not limited to, should speak to your financial situation.

69. State your career goals and the contribution you think you will be able to make towards the development of your country after completing your course of study.



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70. Identify one challenge affecting the youths in your community and suggest ways in which you could make a difference.



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| | | |
|---|-------------|-------------------|
| 11.0 ACADEMIC DISTINCTIONS AND/ OR PRIZES RECEIVED | | |
| 71. State all academic distinctions or prizes received and the year. | | |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| 12.0 PREVIOUS ASSISTANCE RECEIVED FROM THE FINANCIAL AID OFFICE | | |
| 72. State all previous assistance you have received from the Financial Aid Office. | | |
| Donor (Company Name) | Year | Amount(\$) |
| | | |
| | | |
| | | |
| | | |
| 13.0 STUDENTS LOAN | | |
| 73. Did you apply to the Students Loan Bureau (SLB) for the 2017/2018 Academic Year? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| If Yes, Amount Received: Loan \$ _____ Grant \$ _____ | | |
| If No, Why not _____ | | |
| _____ | | |
| _____ | | |
| 74. Did you receive Students Loan Bureau (SLB) for the 2016/2017 Academic Year? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |

Signature: _____ Date: _____

| | |
|---|-----|
| FOR OFFICIAL USE ONLY | |
| <u>Documents Submitted</u> | |
| Progress Report (Returning Students) | [] |
| Copy of CSEC Results (New Students only) | [] |
| Copy of CAPE II Results (New Students only) | [] |
| Copy of ID | [] |
| Letter (s) from Club(s) | [] |
| ASSESSMENT COMMITTEE'S DECISION | |
| _____ | |
| _____ | |
| _____ | |
| _____ | |