

THE UNIVERSITY OF THE WEST INDIES MONA CAMPUS

OFFICE OF STUDENT FINANCING

APPLICATION FOR UWI MONA FACULTY OF ENGINEERING BURSARIES

2021/2022

INSTRUCTION SHEET

- Please read the instructions carefully before completing the application form.
- ALL applicants MUST be Jamaican.
- Answer all questions, incomplete applications will not be processed.
- Completed application forms should be submitted to the **Office of Student Financing**, **UWI Mona Campus** by the stipulated deadlines
- Where income figures are required, gross amounts (amounts before tax) must be stated.
- All amounts stated in the budget planner (page 5) must be in Jamaican Dollars.
- Students are allowed to have <u>one(1)</u> award of any value <u>or</u> multiple awards where the sum total of the awards does not exceed the value of <u>tuition</u>
- The Referee's Affidavit must be signed, stamped (or sealed) and submitted with all application forms. Kindly note the following persons from whom references may be obtained:
 - Senior member of the UWI academic and professional staff (e.g. Lecturer, Student Services' Development Managers, Senior Assistant Registrars)
 - UWI Counsellors (Health Centre)
 - Justices of the Peace
 - Ministers of Religion
 - High School Principal/Vice Principal/ Guidance Counsellor

** Referee's must know the applicant for a minimum of two (2) years and should be able to attest to the information provided by the applicant

- References are valid for six (6) months.
- **Do not** affix this sheet to the application when submitting.



	UWI ID #:						
Title	Last Name/Surname	First Name		Middle Name(s)			
	PLEASE TICK THE AWARD FOR WHICH YOU ARE APPLYING						
MONA FACULTY OF ENGINEERING BURSARY							
PRELIMINARY ENGINEERING BURSARY							

NOTE:

- Applications will not be processed without the completed referee's affidavit-EMAIL ACCEPTED
- You are required to check your UWI (mymona) email for regular communication from OSF
- At the end of the application period students will receive an email acknowledging receipt of all applications

Applicable to Jamaicans without a first degree. Completed application form must be submitted to the Office of Student Financing by August 31st.

L THE UNIVERSITY OF THE WEST INDIES MONA CAMPUS OFFICE OF STUDENT FINANCING UWIAPPLICATION FOR UWI MONA FACULTY OF ENGINEERING BURSARIES 2021/2022

BIOGRAPHIC PROFILE											
1. UWI ID #:						2.	TRN :				
3a. Title	3b. Last N	Jame/Sı	irname	3c. First Name		;		3d. Middle Name			
Former NAME (If Applicable)	IAME Title			4	4c. First Name 4d. Middle Name(s)		Name(s)				
5. Name Type o	of Former N	Name: 1	Maiden []	(Prior to)	Deed	Pol	ll [] Other [] Ple	ease Spe	ecify		
6. Date of Birth	n dd	/ m	m / y	ууу	7. Sez	ex: Male [] Female [] 8. Marital Status					
9. Country of E	Birth					10. Nationality					
11. Are you a U	JWI Staff I	Member	r? Yes []	No []			12. Are you a dependent of a UWI Staff Member? Yes [] No []				
13a. Disability Yes [] No []				13b. State Disability		13c. Are you registered with Jamaica Council for Persons with disabilities? Yes [] No []					
14. Employmen	nt Status			15a. Employer Name (Company)		15b. Supervisor					
16. Employer's	16. Employer's Address 17. Employer's 18. Employer's										
Telephone						E-mail Address					
19. High Schoo	ol Attended	l:									
				Co	NTAC	тI	NFORMATION				
20. Permanent Address Apt./Street/P.O. Box							21. Term/Mailing Address (if you reside on Hall please provide full details) Apt./Street/P.O. Box				
City/Town	C	ountry		Home Phone		1	City/Town	Paris	1	Country	
22. E-mail Address 23. Cellular			ar Phone #			24. Contact #1		25. Contact	#2		

ACADEMIC PROFILE							
PLEASE STATE YO	UR MAJOR/OPTION	•			_		
26. Enrolment	27.Current Level/Year	of study	28. Country of	29. Expected Date of G	raduation		
Status	Preliminary [] Year		Responsibility				
Full Time []	Year Year						
Part Time [] 30. Campus Location			sidence (<i>Residing</i>)	32. Hall of Residence (A	Atta alim ant)		
-	Mona WJC []			52. Hall of Residence (A	Auachment)		
• • • • •	for the Student Exchang	-					
34. Have you been aw	arded a Scholarship/Bu	rsary tenable at	UWI Yes [] No []				
34a. If Yes, state name	e of Award			34b. Value \$			
		PARENT	AL INFORMATION				
35. Mother [] Stepmo	ther []		44. Father [] Stepf	ather []			
36. Name			45. Name				
37Address			46Address				
38. Telephone (W)			47. Telephone (W)				
39. Telephone (H)			48. Telephone (H)	1 ()			
40. Occupation				49. Occupation			
41. Employer			1	50. Employer			
42. Salary \$			50. Employer				
12. Sulary ¢			51. Sulary <u>\$</u>				
Weekly - [] Fortnig	ghtly - [] Monthly - [] Annually -	[] Weekly - [] For	tnightly - [] Monthly - [] Annually - []		
	OUSAL INFORMATIO			PPLICANT'S DEPENDE	-		
52. Name			60. Name		61. Age		
53. Address (If Differe	ent from Applicant's Pe	rmanent Addres	s) 62. Name of		- 1		
X			Child's School				
· · · · · · · · · · · · · · · · · · ·							
			63. Name		64. Age		
			65. Name of				
			- Child's School	l			
			66. Name		67. Age		
54. E-mail Address			68. Name of				
			Child's School				
55 TO 1 1 (11)					N. F. J.		
55. Telephone (H)			69. Other Depende	nt Children? Yes []	No []		
56. Telephone (W)							
57. Occupation							
58. Employer							
59. Salary \$							
Weekly - [] Fortnig	ghtly - [] Monthly - [] Annually -	[]				

Indicate jobs	70. Wor held within last five	k Experience vears (including sur	nmer emplovmen	t)
Name of Organisation	Position Held	From	To	Salary /mont
		dd / mm / yyyy	dd / mm / yyy	
		dd / mm / yyyy	dd / mm / yyy	У
		dd / mm / yyyy	dd / mm / yyy	У
		dd / mm / yyyy	dd / mm / yyy	У
		dd / mm / yyyy	dd / mm / yyy	У
		dd / mm / yyyy	dd / mm / yyy	У
		dd / mm / yyyy	dd / mm / yyy	
		dd / mm / yyyy	dd / mm / yyy	
		dd / mm / yyyy	dd / mm / yyy	
		dd / mm / yyyy	dd / mm / yyy	У
Cluba/Gasistian		Record (On Camp	us)	Ta
Clubs/Societies	Position Held	From	vvvv dd	То
			yyyy dd yyyy dd	
			yyyy dd	
			vvvv dd	
			yyyy dd	
			vvvv dd	
72. Co-Curricular R	ecord (Off Campus-			
Name of Organisation/Group	Position Held	From		To
		dd / mm / ;	yyyy dd	/ mm / yyyy
				/ mm / yyyy
		dd / mm /		/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
			yyyy dd	
		dd / mm /	yyyy dd	/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
			yyyy dd	/ mm / yyyy
		dd / mm /	yyyy dd	/ mm / yyyy
				/ mm / yyyy

BUDGET PLANNER (TO BE COMPLETED IN JMD)

73. Budget (projection of income & expenses) for academic year 2021/2022 – Use gross amounts for proceeds from employment

Expenses (\$)	Income/Resources	s (\$)
78. Tuition Fees	87. Present Bank Balance (student)	
79. Books and Supplies	88. Spouse's Contribution	
80. Accommodation	89. Family Contribution	
Hall of Residence	90. Contribution From Other Sources	
Off Campus	91. Proceeds From Employment	
81. Food	92. Awards (e.g. Scholarships, Bursaries)	
82. Clothing	Name of Award	Value
83. Toiletries	a	(\$)
84. Transportation	b	(\$)
To and From UWI	c	(\$)
Field Trip	93. Tuition Loans (e.g. SLB etc.)	Value
85. Other school expenses (e.g. laptop)	a	(\$)
Item Cost (\$)	b	(\$)
a	94. Grants	
b	a	(\$)
C	b	(\$)
d	95. Other Income/Resources	
86. Total Expenses	96. Total Income/Resources	

97. Shortfall (Subtract Total Expenses from Total Income)



<u>NB:</u>

Gross amounts (amounts before tax) must be stated. All amounts stated must be in Jamaican Dollars. Assume nine months for the academic year (ie calculate one month's expense and multiply by 9 to complete the budgetexcept for tuition and miscellaneous fees. Use the actual UWI fees) For Tuition fees at item 78 of the form please add the UWI tuition and miscellaneous fees and use that figure

98. Academic distinctions and/or prizes receive	ed:					
99. State reasons for applying:						
100. State your career goals and the contribution	100. State your career goals and the contribution you intend to make towards the development of your					
community or country:						
101. PREVIOUS ASSISTANCE RECEIVED FROM THIS OFFICE (IF APPLICABLE)						
DONOR	YEAR	AMOUNT (\$)				

102. I confirm that all information provided in this application is correct and acknowledge that any incorrect information provided will be grounds for the application to be rejected:

Applicant's Signature

Date (DD/MM/YYYY)

Assessment Committee's Decision

Referee's Affidavit						
NAME Last Name/Surname		First Name	Middle Initial(s)			
Address						
Telephone (H)		Telephone	e (W)	E-mail Address		
_						
In what capacit	ty are you signing		Name of Employer/Business			
Name of STUD	ENT being recommended		Student ID #:			
Student Email	Address:					
How long have	you known him/her?	Year(s)		Month(s)		
What do you kr	now of the applicant's family?					
		4:::4:				
	now about the co-curricular ac					
	edge, is this person experienci	ng financial o	difficulties? Yes [] No []		
If 'yes' please e	explain:					
Would you rega If 'yes' please e	ard the student as someone with explain:	th integrity?	Yes [] No []			
	1 					
Is there any oth	ner pertinent information that	you think we	should know? Yes []	No []		
If 'yes' please e						
-	e that the information provided	l above and b	by the applicant is to the best of	f my knowledge true.		
Signed				Date dd / mm / yyyy		
<u>N.B.</u>	should be completed by the follow	wing nersons: 9	Senior members of the LIW/ acaden	nic and professional staff (e.g. Lecturer) Student		

- This form should be completed by the following persons: Senior members of the UWI academic and professional staff (e.g. Lecturer), Student Services and Development Managers, UWI Counsellors (Health Centre), Justices of the Peace, Ministers of Religion, High School Principals/Vice Principals/Guidance Counsellors.
- NO OTHER REFERENCE WILL BE ACCEPTED
- Referees must know the applicant for at least two (2) years and should be able to attest to the information provided by the applicant. All
 referees must affix the official stamp of their office / department / organization. Justices of the Peace (JP's) must affix their official seal
 provided by the Government.