

MSBM 10th ANNIVERSARY SCHOLARSHIP

Open to Jamaican nationals.

Tenable at the Mona Campus to pursue postgraduate studies at Mona School of Business and Management

APPLICANTS MUST COMPLETE ALL SECTIONS

Student Registration/ID #:

SECTION I

| | | | | |
|---|----------------------------------|------------------------------------|------------------------|---------------|
| (1) NAME | <i>Surname</i> | <i>First Name</i> | <i>Middle Name/s</i> | |
| | | | | |
| (2) ADDRESS | _____ | | | |
| | _____ | | | |
| | <i>e-mail address:</i> | | | |
| (3) PHONE | <i>Home</i> | <i>Work</i> | <i>Mobile</i> | <i>Mobile</i> |
| | | | | |
| (4) DATE OF BIRTH | (5) COUNTRY OF BIRTH | | (6) NATIONALITY | |
| <i>year /month/day</i> | | | | |
| (7) GENDER | (8) MARITAL STATUS | | (9) DEPENDENTS | |
| Male <input type="checkbox"/> | Single <input type="checkbox"/> | Separated <input type="checkbox"/> | Number: _____ | |
| Female <input type="checkbox"/> | Married <input type="checkbox"/> | Divorced <input type="checkbox"/> | Ages: _____ | |
| (10) Post Graduate Programme in which you are enrolled for the Academic year 2022/2023: | | | | |
| _____ | | | | |
| (11) Have you been awarded a Scholarship or Bursary tenable at the U.W.I. Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| If yes, state the name of Scholarship/Bursary: _____ | | | | |

(12) Qualifications: [Degrees, Diplomas or Certificates)

SECTION II

(13) Academic Performance in year 1 of the MSc Accounting/MSc Corporate Finance programme

| Course Code | Course Name | Grade |
|-------------------|-------------|-------|
| Semester 1 | | |
| Semester 2 | | |
| Semester 3 | | |

(14) State the reasons why you think you deserve to be awarded this scholarship:

SECTION III

(15) Projected Income and Expenses for Academic Year

A. Employment of Applicant: _____

B. If not employed, please state you sources of financial support e.g. Mother and/or Father, Guardian, Spouse, Loan etc.

(16) 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: _____

(17) 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 | \$ |

Please complete 18 or 19 whichever is relevant

(18) Expenses for Academic Year: Parent(s)/guardian(s)

| | |
|---|----|
| Mortgage | \$ |
| Rent | \$ |
| Dependents=School/University Fees | \$ |
| Other Major Expenses <i>(Please itemize)</i> | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| Total | \$ |

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

| | |
|---|----|
| Mortgage | \$ |
| Rent | \$ |
| Dependents=School/University Fees | \$ |
| Other Major Expenses <i>(Please itemize)</i> | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| Total | \$ |

