Applications are invited for the UWIREF Scholarships and Bursaries. You are asked to print clearly or place a tick ( ) in the appropriate boxes.

Eligibility requirements: Applicants should satisfy all of the following criteria:
- Be citizens of one of UWI’s Contributing Countries
- Be a first time applicant to read for an undergraduate degree
- Be in the process of applying to the UWI
- Demonstrate financial need

Conditions of Awards: Scholarship winners will receive the campus-specific benefits for the official duration of their degree programmes as follows:
- Cave Hill and St. Augustine – **Bursaries** (Maintenance costs)
- Mona and Open Campus – **Full Scholarship** (Tuition and Maintenance costs) OR **TUITION only**

Applicants should download, complete and submit the following form in **DUPLICATE** to the Senior Assistant Registrar, Admissions, Mona; Assistant Registrar, Admissions, St. Augustine; Assistant Registrar, Admissions, Cave Hill; or Heads of Centres, Open Campus. Completed forms MUST be submitted by January 31, 2009.

**SECTION A**

LAST NAME (Block Capitals) ________________________________

OTHER NAMES (Block Capitals) First ________________________ Middle ________________________

DATE OF BIRTH dd ________ mm ___________ yy ___________ AGE LAST BIRTHDAY ( )

COUNTRY OF BIRTH ______________________________________

MARITAL STATUS Single ( ) Married ( ) Divorced ( ) Widowed ( )

Nationality __________________ Parent/Guardian Nationality __________________

SEX: Male ( ) Female ( )

PERMANENT ADDRESS ______________________________________

Email: ___________________________________ TELEPHONE NO. __________________

Cell No: ________________________________

MAILING ADDRESS (if different from Home Address)

__________________________________________
SECTION B - FINANCIAL INFORMATION

NAME OF APPLICANT: __________________________________________________________

INFORMATION – PARENT/GUARDIAN

NAME OF PARENT/GUARDIAN: ____________________________________________________

JOB TITLE OF PARENT/GUARDIAN: _______________________________________________

PLACE OF EMPLOYMENT: _________________________________________________________

What proportion of your University Education will your Parent/Guardian be able to pay? ________________

Do you agree to pay the required fees to the University of the West Indies as required by its regulations? Yes ( ) No ( )

If not, how will the fees be paid? ______________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Signature of Applicant ___________________________ Date: __________________________

Signature of Parent/Guardian: ___________________________ Date: __________________________
## SECTION C

**REFEERE’S AFFIDAVIT**

<table>
<thead>
<tr>
<th>Home Address</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone (H)</td>
<td>Telephone (W)</td>
</tr>
<tr>
<td>Occupation</td>
<td>Name of Employer/Business</td>
</tr>
</tbody>
</table>

**Name of student being recommended**

**How long have you known him/her?**

<table>
<thead>
<tr>
<th>Years (s)</th>
<th>Month (s)</th>
</tr>
</thead>
</table>

**What do you know of the applicant’s family?**

**What do you know about the co-curricular activities of the applicant?**

**Is this person experiencing financial difficulties?**

<table>
<thead>
<tr>
<th>Yes [   ]</th>
<th>No [   ]</th>
</tr>
</thead>
</table>

If ‘yes’, please explain:

**Would you regard the student as someone with integrity?**

<table>
<thead>
<tr>
<th>Yes [   ]</th>
<th>No [   ]</th>
</tr>
</thead>
</table>

If ‘yes’, please explain:

**How would assistance from the UWIREF Scholarship/bursaries benefit the student?**

**Is there any other pertinent information that you think we should know?**

<table>
<thead>
<tr>
<th>Yes [   ]</th>
<th>No [   ]</th>
</tr>
</thead>
</table>

If ‘yes’, please explain:

I hereby declare that the information provided above and by the applicant is to the best of my knowledge true.

Signed  _________________________________  Date  ________________

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**N.B.**
- Referees must have known the applicant for at least two (2) years and should be able to attest to the information provided by the applicant.
- All Referees (Guidance Counselors/Principals) must affix the official stamp of their office/department/organization.