MONA BAPTIST CHURCH
DOUGLAS SAMUELS MEMORIAL SCHOLARSHIP

Who is eligible?

✓ Tertiary level, full-time undergraduate students, going into their final year:
  - Pursuing a Diploma or Degree in: Education, Guidance and Counselling, the Arts, and Theology, in any accredited educational institution in Jamaica
  - Maintaining a B average
  - Demonstrating financial need

Value: $200,000

Applications Close: May 31, 2019

Application forms are available at your institution's financial aid office, and also from the Mona Baptist Church Office – 4-6 University Meadows (Opposite UTech).
MONA BAPTIST CHURCH
DOUGLAS SAMUELS MEMORIAL
SCHOLARSHIP
APPLICATION FORM

Instructions
Before completing this form, please read the stipulations laid out below.
(i) Only full-time students going into final year in Education, Guidance and Counselling, the Arts, and Theology are eligible.
(ii) Candidates must have a minimum B average in academic performance.
(iii) Candidates should be Jamaican citizens domiciled in Jamaica for the last five years.
(iv) Each candidate should complete one copy of this form.
(v) The following documents must be submitted with the application:
   - Transcript or certified copy of the latest progress report.
   - Reference form completed by current educational institution, e.g. Principal, Head of Department or Programme (in sealed envelope)
   - Reference form completed by Pastor/Priest (in sealed envelope)
(vi) The completed application form, along with required documents, should be submitted by May 31, at 4:00 p.m. to the Secretary, Mona Baptist Church, 4-6 University Meadows, Kingston 6 (Opposite UTech).

Biographical Information
1. Name (Mr./Mrs./Miss) ........................................ First Middle Surname

2. Permanent Address ..................................................

3. Mailing Address ..................................................

4. Telephone# ..................................................... (h) ........................................ (c)

5. E-mail Address ..................................................

6. Place and Date of Birth ....................................... Day/Month/Year ........../...../........

7. Nationality ..........................................................


9. Name of Spouse ..................................................

10. Occupation of spouse ..........................................

11. Number of children ........................................... Ages of children
12. Mother’s/Guardian’s Name

13. Mother’s/Guardian’s Occupation

14. Father’s Name

15. Father’s Occupation

16. Number of siblings Ages of siblings

**Educational Background**

17. List institutions attended, beginning with the current one:

<table>
<thead>
<tr>
<th>Institution</th>
<th>Place &amp; Country</th>
<th>Years Attended</th>
<th>Certificate/Diploma Gained</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>From</td>
<td>To</td>
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<td></td>
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</tbody>
</table>

18. Faculty/School/Department in which you are enrolled

19. Programme/Specialization in which you are presently enrolled

20. Are you a part-time or full-time student?

21. Expected date of completion

22. Academic Distinctions or Prizes Received

23. Please declare any scholarship/bursary/grant (a) you have applied for, (b) you are currently enjoying, (c) you may have received during your current course of study.

(a)

(b)

(c)
Work Experience

24. Occupation or employment over the last five years (if applicable). Include summer and part-time jobs.

<table>
<thead>
<tr>
<th>Name &amp; Address of Employer</th>
<th>Job Title</th>
<th>Date of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Church/Co-curricular/Community Involvement

25. Name & Address of the Church you attend ..........................................................

26. Name of Pastor/Priest .................................................................

27. Church activities in which you are involved ..................................................

28. Extra-curricular activities at current educational institution ..........................

29. Other community activities in which you are involved ........................................

30. Information about person supplying reference from current educational institution.

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Institution, Address &amp; Telephone #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>
31. Using the space below, state clearly your areas of financial need, and any other reason why you feel you should be granted this scholarship.

NB: *Giving false information will lead to the withdrawal of a scholarship offer.*

<table>
<thead>
<tr>
<th>Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>I certify that the information given in this application is complete and accurate to the best of my knowledge. If selected as a recipient of the Mona Baptist Church Douglas Samuels Memorial Scholarship, I agree to comply with the regulations and conditions governing such Scholarship.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature of Applicant</th>
<th>Date</th>
</tr>
</thead>
</table>

**ABOUT DOUGLAS SAMUELS**
The late Douglas Samuels was a Deacon of Mona Baptist Church and Senior Lecturer in Art Education at St. Joseph Teachers' College. He was a committed Christian who believed in service to God and to humanity. As one of the pioneer members of the Mona Baptist Church, he offered significant leadership and service to the church fellowship and the wider community. As educator, he served as college lecturer, CXC examiner, mentor, and counsellor to many. The hallmark of his ministry was humility and servant leadership. His ministry was also characterized by love for the youth, the elderly and the poor, and respect for all.
MONA BAPTIST CHURCH

DOUGLAS SAMUELS MEMORIAL SCHOLARSHIP

LETTER OF REFERENCE: ACADEMIC PROFESSIONAL

SECTION A
TO APPLICANT: Please print your name in the space below. This form must be completed by the referee from your educational institution and returned to you, in a sealed envelope, to be submitted with the application form.

.................................................................................................................. is an applicant for the Mona Baptist Church Douglas Samuels Memorial Scholarship, and requests that you complete this evaluation.

(Name in Full)

SECTION B
TO REFEREE: The referee’s report is confidential. Please return the completed report to the applicant in a sealed envelope, with your signature across the flap.

1. How long and in what capacity have you known the individual?

..................................................................................................................

2. On the following scale, make your ratings based on your knowledge of the individual in the context of this educational institution.


<table>
<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Good</th>
<th>Average</th>
<th>Below Average</th>
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</thead>
<tbody>
<tr>
<td>Academic Performance</td>
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<td>Intellectual Potential</td>
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<tr>
<td>General Conduct</td>
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<tr>
<td>Co-curricular Involvement</td>
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</table>
Describe the individual’s academic strengths, Faculty/College/University involvement, and any outstanding achievements.

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Name................................................ Signature..................................................
Occupation.......................................... Date....................................................
Position.............................................
Institution...........................................
Address.............................................
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Telephone...........................................
MONA BAPTIST CHURCH

DOUGLAS SAMUELS MEMORIAL SCHOLARSHIP

LETTER OF REFERENCE: CHURCH

SECTION A
TO APPLICANT: Please print your name in the space below. This form must be completed by your current Pastor/Priest, and returned to you, in a sealed envelope, to be submitted with the application form.

.........................................................is an applicant for the Mona
(Name in Full)

Baptist Church Douglas Samuels Memorial Scholarship, and requests that you complete this evaluation.

SECTION B
TO REFEREE: The referee’s report is confidential. Please return the completed report to the applicant in a sealed envelope, with your signature across the flap.

1. How long and in what capacity have you known the individual?

.........................................................

2. On the following scale, make your ratings based on your knowledge of the individual.

<table>
<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Good</th>
<th>Average</th>
<th>Below Average</th>
<th>Not Able To Rate</th>
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<tbody>
<tr>
<td>Evidence of Christian Commitment</td>
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<td>Willingness to work along with others</td>
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<tr>
<td>Involvement in church ministry/ministries</td>
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<tr>
<td>Community Involvement</td>
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</tbody>
</table>
Write your impressions of the individual, commenting on character, church/community involvement, and perceived financial need.

Name.................................................. Signature...........................................

Occupation.......................................... Date..................................................

Church................................................

Address.............................................

Telephone........................................