



THE UNIVERSITY  
OF THE  
WEST INDIES  
MONA CAMPUS  
JAMAICA, WEST INDIES

**MONA SOCIAL SERVICES LIMITED**  
**THE UWI TOWNSHIP SCHOLARSHIP**

**SCHOLARSHIP RULES & CONDITIONS**

**1. Scholarship governing rules**

- a) **FULL** Scholarship awarded **ONLY** for University Grants Committee (UGC) funded programmes. N.B. Please visit Faculty office or website for the list of UGC funded programmes.
- b) Other Scholarships will be awarded for **full time** study in any faculty (Please note that Law, Engineering and all Medicine Programme are partially funded) at the UWI Mona campus, beginning in the academic year.
- c) Renewal of the scholarship is dependent on student's performance and satisfying of other scholarship conditions.
- d) In order for a student to retain his/her scholarship after the academic year he/she must obtain a cumulative GPA of 3.0 or higher.
- e) Students who fall below a cumulative GPA  $\leq 2.49$  will not be allowed to continue the scholarship.
- f) Students, who after the first year obtained a cumulative GPA  $\leq 2.99$  but  $\geq 2.5$  will be eligible for a half scholarship provided all other conditions are met.
- g) The duration of the scholarship should not exceed 3 years except in the case of disciplines that go beyond three years.
- h) The scholarship **ONLY** covers Semesters I and II with the exception of disciplines with three semesters
- i) The scholarship does not cover expenses related to the re-sit of examination(s). Students are expected to meet the expenses of these activities.
- j) Students cannot be employed full-time. **N.B.** Recipients to note the UWI's policy on student work.
- k) The scholarship covers **Tuition ONLY**

**2. Additional scholarship conditions**

- a) All scholarship recipients must commit to the completion of 26 service hours **per** semester for the duration of their scholarship award. The Mona Social Services Limited reserves the right to place the scholar wherever it may deem fit, based on needs.
- b) It is **MANDATORY** for **ALL SCHOLARS** to attend **ALL PERSONAL DEVELOPMENT SESSIONS**, planned for them by MSS in each semester. A Scholars package distributed at the beginning of the year will provide details on the planned sessions.
- c) Failure to comply with (a) and/or (b) above, may affect future consideration for scholarship
- d) Upon graduation students must be available to the MSS to assist with project implementation(s) in the UWI communities for a period not exceeding two years.
- e) Students are required to have a regular course load based on programme of study.

## APPLICATION FORM

### INFORMATION SHEET

- Please **read the information below carefully** before completing this form and answer all relevant questions. Incomplete applications will not be processed.  
Where the information requested in an item is not applicable to your situation please indicate 'N/A'

#### ▪ Eligibility & Requirements

Applicants must be between 16-30 years old.

The scholarship is applicable to the UWI. Individuals applying for this scholarship must have applied to the UWI and are expecting to matriculate into the UWI in **September 2020** for full time study for an undergraduate degree, in any one of UWI's five faculties.

Applicants must show proof of residence in Greater August Town or the Mona Common for a period not less than 10 years.

Applicants are required to submit **two passport size photos** with their application.

#### ▪ Your Application!

##### Applications open Friday, June 19, 2020

Completed application forms should be sealed, under confidential cover, and submitted to the August Town Kairos Source, Mona Common Steering Committee, Standpipe Community Development Council (CDC) and Glendevon CDC and addressed: To the attention of the Executive Director, Mona Social Services Limited by

**Friday, July 3, 2020. LATE APPLICATIONS WILL NOT BE ACCEPTED.**

**The Referee's Affidavit must be submitted** with all application forms. Kindly note the following persons in the community from whom references may be obtained:

- **Head of the various Community Development Council/Steering Committee**
- **Justices of the Peace**
- **Ministers of Religion**
- **Community School Principal**
- **Highest ranking officer from Community Police Station**

***NB: Referee's should know applicant for a minimum of **two (2) or more years.*****

#### ▪ Notification of Successful Candidates

**Only shortlisted candidates will be contacted**

**All successful candidates will be informed by August 2020. (Subject to change)**

**Notification for an interview and its venue will be communicated by July 10, 2020. (Subject to change)**

### BIOGRAPHIC PROFILE

<b>3. NAME</b>	Title	Last Name/Surname	First Name	Middle Name(s)
4. Date of Birth <b>dd / mm / yyyy</b>		5. Sex: Male [ ] Female [ ]		6. Marital Status
7. Country of Birth			8. Nationality	
9. Number of years living in community			10. Are you a dependent of a UWI Staff Member? Yes [ ] No [ ]	
11. Please indicate if you have a Disability				

### CONTACT INFORMATION

<b>12. Permanent Address</b>			<b>13. Term/Mailing Address</b>		
Apt./Street/P.O. Box _____			Apt./Street/P.O. Box _____		
_____			_____		
_____			_____		
City/Town	Country	Home Phone	City/Town	Parish	Country
14. E-mail Address		15. Cellular Phone #	16. Contact #1		17. Contact #2

### Academic Profile

18. Faculty of Admission/Conditionally Accepted for:	19. Programme (B.A., B.Sc. etc.)	20. State your Major/Option
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### PARENTAL INFORMATION

<b>Mother or Guardian</b>		<b>Father or Guardian</b>	
21. Name		27. Name	
22. Address _____		28. Address _____	
_____		_____	
23. Telephone (W/ Cellular)		29. Telephone (W/Cellular)	
24. Telephone (H/Cellular)		30. Telephone (H/Cellular)	
25. Occupation		31. Occupation	
26. Employer		32. Employer	

33. Salary \$ _____ Weekly – [ ] Fortnightly – [ ] Monthly – [ ] Annually – [ ]	34. Salary \$ _____ Weekly – [ ] Fortnightly – [ ] Monthly – [ ] Annually – [ ]
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<b>SPOUSAL INFORMATION</b>	<b>APPLICANT’S DEPENDENTS</b>
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35. Name	43. Name	44. Age.
36. Address (If Different from Applicant’s Permanent Address)	45. Name of Child’s School	
	46. Name	47. Age.
	48. Name of Child’s School	
	49. Other Dependent Children    [ ] Yes    [ ] No	
37. E-mail Address		
38. Telephone (H/Cellular)		
39. Telephone (W/Cellular)		

40. Have you been awarded a Scholarship/Bursary tenable at UWI Yes [ ] No [ ]

41. If Yes, state name of Award \_\_\_\_\_ 42. Value \$ \_\_\_\_\_

**50. Co-Curricular Record & Community Involvement**

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**51. Work Experience**  
Indicate jobs held (including vacation employment)

Name of Organisation	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	

52. Please indicate why you applied for this scholarship and how would it benefit you and community.

**BUDGET PLANNER**

53. Budget for Academic Year \_\_\_\_\_/\_\_\_\_\_

Expenses (\$)		Income/Resources (\$)	
54. Tuition Fees	_____	63. Present Bank Balance	_____
55. Books and Supplies	_____	64. Spouse's Contribution	_____
56. Accommodation		65. Family Contribution	_____
Hall of Residence	_____	66. Contribution From Other Sources	_____
Off Campus	_____	67. Proceeds From Employment	_____
57. Food	_____	68. Awards (e.g. Scholarships, Bursaries)	
58. Clothing	_____	Name of Award	Value
59. Toiletries	_____	a. _____	(\$) _____
60. Transportation		b. _____	(\$) _____
To and From UWI	_____	c. _____	(\$) _____
Field Trip	_____	69. Tuition Loans (e.g. SLB etc.)	Value
61. Contingencies (Please Specify)		a. _____	(\$) _____
Item	Cost (\$)	b. _____	(\$) _____
a. _____	_____	70. Grants	
b. _____	_____	a. _____	(\$) _____
c. _____	_____	b. _____	(\$) _____
d. _____	_____	71. Other Income/Resources	_____
<b>62. Total Expenses</b>	=====	<b>72. Total Income/Resources</b>	=====

73. Shortfall (Subtract Total Expenses from Total Income)

74. I affirm that the information provided within this form is correct:

**DISCLAIMER: By applying for this scholarship, I am declaring that I am not and have not been involved in any illegal activities nor am I a member of any organization or group associated with any criminal activities as defined under the laws of Jamaica and that my educational pursuits will not in full or part be funded or supported by such organization or group. I understand that upon knowledge of any such affiliation as aforementioned, Mona Social Services, a subsidiary of the UWI, acting on its behalf, reserves the right to terminate this process or withdraw the scholarship offer.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date (dd/mm/yyyy)

**REFEREE'S AFFIDAVIT TO INCLUDE AUTHORIZED PERSONS LISTED ON PAGE 1**

<b>75. NAME</b>	Last Name/Surname	First Name	Middle Initial(s)
76. Home Address			
<hr/> <hr/> <hr/>			
77. Telephone (H)		78. Telephone (W)	79. E-mail Address
80. Occupation		81. Name of Employer/Business	
82. Name of <b>STUDENT</b> being recommended			
83. How long have you known him/her?		Year(s)	Month(s)
84. How long has the applicant lived in the community?			
85. What do you know of the applicant's family?			
<hr/> <hr/>			
86. What do you know about the co-curricular activities of the applicant?			
<hr/> <hr/> <hr/>			
87. Is this person experiencing financial difficulties? Yes [ ] No [ ]			
88. If 'yes' please explain:			
<hr/> <hr/> <hr/>			
89. Would you regard the student as someone with integrity? Yes [ ] No [ ]			
90. If 'yes' please explain:			
<hr/> <hr/> <hr/>			
91. How would this scholarship benefit the student?			
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92. Is there any other pertinent information that you think we should know? Yes [ ] No [ ]			
93. If 'yes' please explain: _____			
<hr/> <hr/>			
94. I hereby declare that the information provided above and by the applicant is to the best of my knowledge true.			
Signed _____			Date <b>dd / mm / yyyy</b>

- N.B.** - 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.

**For Official Use Only**

**Documents Submitted**

_____	_____
_____	_____
_____	_____

**Assessment Committee's Decision**

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_____
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