

THE UNIVERSITY OF THE WEST INDIES SOL SCHOLARSHIP APPLICATION FORM



(Open to students at Cave Hill, Mona & St. Augustine Campus in the following facilities: Engineering, Science & Technology and Social Sciences)

Studen	nt ID #		
		MALE [
FEN		FEMALE	
CELL NO:			
COUNTRY OF BIRTH			
MARITAL STATUS			
Married 🗌	Separated	Divorced	
•			
	Yes 🗆	No 🗆	
	FAX NO:	FAX NO: CELL NO: COUNTRY OF BIRTH MARITAL STATUS Married Separated you are applying. ary tenable at U.W. I.? Yes	

		Faculty			
		Campus			
		Year			
. ACADEMIC	QUALIFICATIONS (NE	3. Paragraph ii, Page 6)			
EXAMINING	SUBJECTS		ADVANCED OR		GRADE
BODY: CAMBRIDGE/		ORDIN	ORDINARY/G.P.		
LONDON/CXC CXC (CAPE)		Level Taken	Level Obtained		
					+
					+
Other avalis	actions (Contificates De	guass ou Dinlamas)			
. Other quanti	cations: (Certificates, De	grees or Diplomas)			

SECTION II

PERSONAL HISTORY

16. SCHOOL/UNIVERSITY RECORD

YEARS	SCHOOL/UNIVERSIT	Y ACTIVITIES
121113	Serie de la crita	110111111111111111111111111111111111111
17. STATE	YOUR OTHER INTERE	ST AND ACTIVITIES
18 ANY O	THER INFORMATION	
SECTION I	<u>II</u>	
19 <u>. REFER</u>	ENCES	
	NAME	ADDRESS

SECTION IV:

20.. PROJECTED INCOME AND EXPENSES FOR ACADEMIC YEAR

	A.	Employment of Applicant:
	В.	If not employed, please state your sources of financial support e.g Mother and/or Father Guardian, Spouse, Loan etc.
21. If s	source	is Mother and/or Father, Guardian, Spouse, please state
		Name:
		No. of Dependents:
		Ages of Dependents:
		Place of Employment:
		Post Held:
		Annual Salary:

22... 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	\$

23. Expenses for Academic Year:

PARENT(S)/GUARDIAN(S)

Mortgage	\$
Rent	\$
Dependents=School/University Fees	\$
Other Major Expenses	\$
(Please itemize)	\$
	\$
	\$
	\$
TOTAL	\$

24. Expenses for Academic Year

APPLICANT AND/OR SPOUSE

Mortgage	\$
Rent	\$
Dependents=School/University Fees	\$
Other Major Expenses (Please itemize)	\$
	\$
	\$
	\$
	\$
TOTAL	\$

SECTION V:

25. SUPPORTING INFORMATION

STUDENT MAY PROVIDE BELOW ANY ADDITIONAL INFORMATION THAT COULD SUPPORT
THIS REQUEST FOR FINANCIAL ASSISTANCE (
26. I certify that the above information is true and correct to the best of my knowledge and belief.
Signature of Applicant
Date

IMPORTANT NOTE

1. ANY OTHER INFORMATION

Full details should be given of any involvement in Community life and/or service, and should be certifiable from records. Include membership of Clubs, etc.