

**MINISTRY OF EDUCATION  
UNIVERSITY OF TECHNOLOGY SCHOLARSHIP (OPEN) 2014/2015  
APPLICATION FORM**

- A. Each candidate should complete two (2) copies of this form (in **BLOCK CAPITALS**) and submit them together with supporting documents to the Ministry of Education, Tertiary Unit, 2 National Heroes Circle, Kingston 4, **NO LATER THAN MAY 1, 2014**

***Documents to be submitted:***

1. Certified copy of birth certificate or evidence of date of birth.
2. A statement written by a reputable member of the community attesting that you have resided in Jamaica during the last three consecutive years.
3. Two passport-size photographs, stapled to the form.
4. One copy of statement of not more than 200 words as instructed at item 17.
5. Valid evidence of acceptance/registration at the University of Technology.
6. Letter of approval from Chief Personnel Officer or his representative (in the case of applicants in the Civil Service).
7. Certified copies of educational certificates/diplomas and a current progress report if attending University.

**(Please attach supporting documents to back of application form).**

- B. Applicants are advised that incomplete applications will **NOT** be accepted. Applications should be explicit enough to facilitate a decision.

- C. Detach the referee form attached and submit to your referees named at item 19.

- D. The scholarship award is valid for the academic year immediately following the offer of the award and cannot be deferred for any reason.

- 1 Name in full \_\_\_\_\_  
(BLOCK CAPS) SURNAME FORE NAMES
- 2 Nationality \_\_\_\_\_
- 3 Place and Date of Birth \_\_\_\_\_
- 4 Sex \_\_\_\_\_ Telephone \_\_\_\_\_
- 5 Address for correspondence about this application \_\_\_\_\_  
\_\_\_\_\_
- 6 **Address of Permanent Residence (if not the same as 5)**  
\_\_\_\_\_  
\_\_\_\_\_ Tel \_\_\_\_\_
- 7 Parents' Name (Mother) \_\_\_\_\_ (Father) \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_
- 8 Telephone No. \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

9. Educational Record.

INSTITUTION	YEAR ATTENDED	
	FROM	TO
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9b. If intending to sit an examination before taking up the award, give particulars and date when result is expected.

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ACADEMIC QUALIFICATIONS - STATE DETAILS CLEARLY, WHERE APPLICABLE THESE SHOULD INCLUDE PROFESSIONAL CERTIFICATES AND DIPLOMAS OBTAINED.

DATE	EXAMINATION	SUBJECTS	STATE LEVEL (ADVANCE, ORDINARY, PRINCIPAL OR SUBSIDIARY)	RESULTS (GRADE)

10. Academic Distinctions gained or offices held during educational career.....

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11. Proposed course(s).....

12. Length of Proposed Course.....

13. Period which you expect award to cover.....

14. Extra- curricular interests and activities, if any.....

15. Proposed future occupation.....

16. Have you applied to/been accepted by the University of Technology.....

17. Outline in not more than 200 words why you wish to pursue this course and the benefits to be gained from the course.

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18. Indicate extra-curricular interests/activities

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19. Please give the names of two referees preferably persons under whom you have studied or worked.

1. Name \_\_\_\_\_

Position \_\_\_\_\_ Institution \_\_\_\_\_

Address \_\_\_\_\_ Tel \_\_\_\_\_

2. Name \_\_\_\_\_

Position \_\_\_\_\_ Institution \_\_\_\_\_

Address \_\_\_\_\_ Tel \_\_\_\_\_

Detach accompanying referee forms and send them to the persons you have listed above.

20. Any other information which you consider relevant to this application.

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Kindly submit to:- **Ministry of Education**  
**The Tertiary Unit (Building 3)**  
**2 National Heroes' Circle**  
**P.O. Box 498**  
**Kingston 4**  
**Tel: 922-1400-9**