



University of Technology, Jamaica

Students' Union

SEMESTER I BURSARY APPLICATION FORM AY 2017/18

DEADLINE: September 15, 2017.

Instruction Sheet

- Please **read the instructions carefully** before completing this form and answer all relevant questions. **INCOMPLETE applications will not be PROCESSED.**
- Applicants are required to complete all sections of the form in **BLOCK LETTERS** only. Please indicate **'N/A'** where the information requested in a section is not applicable to your situation. **ALL INFORMATION PROVIDED WILL BE CHECKED AND VERIFIED.**
- Students who falsify information will be disqualified from any future assistance from the Students' Union Office.
- Completed application forms should be submitted to the Students' Union Office. Please note that you are required to provide copies of all supporting documents such as:
 - ✓ Cover letter
 - ✓ Current school I.D,
 - ✓ A recent statement of outstanding balance printed and stamped at the **Finance Department**;
 - ✓ Receipts of all payments made to date
- **Suitable Referees, Justices of the Peace, UTech Lecturers and UTech Middle & Senior Managers and all Applications must be signed by a Students' Union Council Member.**
- **Financial Assistance Offered:**
 - ✓ **Tuition**
 - ✓ **Dorm:**
 - ✓ **Lunch Subsidies:**
- **Qualification Criteria**

The following are the general conditions that should be met in order to benefit from assistance under the Students' Union:

 - ✓ Applicants must be able to prove that s/he has exhausted or have been turned down for **ALL** available sources of financing for reasons other than the non-payment of previous loans.
 - ✓ Applicants are only allowed **One (1) benefit per Academic year**. **Second application will not be considered**; ONLY in exceptional cases the Assessment Committee may decide to provide further assistance.
- Successful applicants will be notified or contacted through the Students' Union Notice Boards, Websites, Email or Telephone.

1.0. GENERAL INFORMATION

1. Please tick where applicable:

- Full-time
- Part-Time

2. College/Faculty/School:

- Faculty of Business and Management ; School: _____
- Faculty of the Built Environment ; School: _____
- Faculty of Education and Liberal Studies ; School: _____
- Faculty of Science and Sport ; School: _____
- Faculty of Engineering and Computing ; School: _____
- College of Health Sciences ; School: _____
- Joint Colleges of Oral Health and Veterinary Science ;
- Faculty of Law

3. Campus: Kingston ; Montego Bay

4. Programme Year: Year 1 ; Year 2 ; Year 3 ; Year 4 ; Year 5

5. Type of Assistance (Select only one)

Tuition Lunch Dorm Bursary Other _____

6. Have you ever received assistance from the Students' Union? Yes No

If Yes please state type(s) _____

7. Please state other source(s) of assistance:

- A: _____
- B: _____
- Other: _____; _____; _____; _____

8. Please answer All questions

Tick the person (s) who contributes to your financial welfare:

Mother Father Spouse Others _____

Telephone Contact (C) _____ Telephone Contact (W) _____

Occupation (s) _____

Employer: _____

Salary \$ _____

Weekly Fortnightly Monthly

Have you applied for Students' Loan/ JAMVAT/ NYS? Yes No

- If yes please state: _____
- Were you successful? Yes No

2.0. BIOGRAPHIC PROFILE			
1. ID #		2. Title: <i>Mr. / Mrs. / Ms. / Miss</i>	
3. NAME	Last Name:	First Name:	Middle Initial:
4. Date of Birth: <i>dd / mm / yyyy</i>	5. Gender: <i>Male [] Female []</i>	6. Marital Status: _____	
7. Country of Birth:		8. Nationality:	
9. Disability: Yes [] No [] If Yes, Please State _____	10. Employment Status:	11. Employer:	
12. Employer's Telephone: _____	11. Employers E-mail Address: _____		
3.0. Contact Information			
1. Permanent Address _____ _____ _____		Semester Address (if you reside on hall please provide full details) _____ _____ _____	
2. Telephone #	Digi: _____ Lime _____	Work: _____	
3. Email Address (Block Capital):			
REFERENCE:			
Name: _____ Address: _____ Phone: _____ E-Mail: _____		Students' Union Council Member's Information	
		Name: _____ Portfolio: _____ Signature: _____	
Council Member's Comment			
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FOR OFFICIAL USE ONLY			Students' Union Stamp or V.P. Students Services Signature
Approve for : Lunch Ticket [] Tuition [] Dorm []		Approved By : _____ Date: _____	