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**For Official Use Only:**

**Customer ID …………………………**

**Scholarship ID ………………………**

 GOVERNMENT OF SAINT LUCIA

EQuIP Project

Scholarship Application Form

Scholarship Programme: ………………………………………….………..……………….………………………………………………

Institution:.……………………………………………………………………………………………………………………………………….…

Country where studies will be undertaken: ……………………………………………………………………………..…………

Area of Study: ………………………………………………………………………………………………………………………………….

Level of Study: PhD [ ] Graduate [ ]Undergraduate [ ]Diploma [ ]Certificate [ ]

Commencement Date: …………..……………….… Duration of Study: Years [ ] Months [ ]

 1. (a) Surname: ………………………………………………………. 2. Date of Birth: …………………………..………………………………

 (b) First Name: …………………………………………………….. 3. Age: ……………………………… 4. Sex:………….…………………

 (c) Other Names: …………………………………………………. 5. Marital Status: …………………………………….………………….

…………………………………………………………………….…. 6. Staff No./NIS No: ………………………………….…….…………….

 7. Place of Birth: ………………………………………………………………………………………………………………………………………………..

 8. Nationality: ………………………………………………………………………………………………………………………………….…….…………

 9. Home Address: ………………………………………………………. Postal Address: ……………………..……………………………………

 Mobile#…………………… Work#…………………… Home#…………………… Email address: ……………………………………..…

10. Present Occupation: …………………………………………………………………………………………………………………………………….

 Ministry/Department/Organisation:………………………………..…….……………………………………………………….…………….

11. Next of Kin: Name: …………………………………………………………… Relation: …………………………….…………………………..

 Home Address: ………………………………………………………. Postal Address: ……………………..…………………………………….

Mobile#…………………… Work#…………………… Home#…………………… Email address: ……………………………………..…

12. Educational Record: List most recent educational experience first

|  |  |  |  |
| --- | --- | --- | --- |
| Education Institution  | Address | Years Attended From To | Qualifications obtained if any, listing subjects and grades  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| c. |  |  |  |  |
| d.  |  |  |  |  |

13. Employment Experience: List most recent employment experience first

 (a) Name of Employer: ……………………………………………..……………. Title and Responsibilities of your Post:

 Location: …………………………………………………………………….……. ………..……………………………………………………………..

 Type of Organisation: …………………………………..…………………. ……………………………………………………………………….

 Employed from: ………………..……… To: ………………………..….. ……………………………………………………………….……….

 (b) Name of Employer: ……………………………………………..……………. Title and Responsibilities of your Post:

 Location: …………………………………………………………………….……. ………..……………………………………………………………..

 Type of Organisation: …………………………………..…………………. ……………………………………………………………………….

 Employed from: ………………..……… To: ………………………..….. ……………………………………………………………….……….

 (c) Name of Employer: ……………………………………………..……………. Title and Responsibilities of your Post:

 Location: …………………………………………………………………….……. ………..……………………………………………………………..

 Type of Organisation: …………………………………..…………………. ……………………………………………………………………….

 Employed from: ………………..……… To: ………………………..….. ……………………………………………………………….……….

14. Provide Details of Professional or Technical Qualifications, if any: (e.g. AAT, CGA, ACCA)

 ……………………………………………………………………………………………………………………………………………………………………….

 ……………………………………………………………………………………………………………………………………………………………………….

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15. Provide Details of Special Skills, if any: (e.g. Computer proficiency, typing abilities, etc.)

 ……………………………………………………………………………………………………………………………………………………………………….

 ……………………………………………………………………………………………………………………………………………………………………….

 ……………………………………………………………………………………………………………………………………………………………………….

16. Provide details of Voluntary, Social, Community and Sporting Activities:

 ……………………………………………………………………………………………………………………………………………………………………….

 ……………………………………………………………………………………………………………………………………………………………………….

17. Have you previously applied for a Scholarship? Yes [ ] No [ ]

 If **YES**, please specify: ………………………………………………………………………………………………………………………………….....

 Have you been granted a Scholarship? Yes [ ] No [ ]

 If **YES**, please specify and give year(s) and area (s) pursued:

 ……………………………………………………………………………………………………………………………………………………………………….

 YEAR: AREA: LEVEL: (Graduate, Undergraduate, Diploma)

 …………………………………. ……..…………………………………………… ……………………….…………………………………….

 …………………………………. ……..…………………………………………… ……………………….…………………………………….

 …………………………………. ……..…………………………………………… ……………………….…………………………………….

18. Has anyone in your family attended university? Yes [ ] No [ ]

 If **YES,** please specify:

 Mother [ ] Father [ ] Sibling [ ] Children [ ]

19. Have you applied to an Educational Institution? (If **YES**, give details):

 ………………………………………………………………………………………………………………………………………………………………………..…….

 …………………………………………………………………………………………………………………………………………………………………………..….

20. In not more than **200 words** indicate your reasons for seeking training, its importance to your career and the

way in which you intend to apply your training upon its completion. **(Attach an extra sheet of paper)**.

21. Important: All sections of this form **MUST** be completed. Application Forms which have not been fully

completed, and forms not accompanied by the documentation stipulated below will not be considered.

The documentationlisted below must accompany this form.

1. Verified copies of Academic, Professional and Technical Certificates**(Verified by the Min. of Education)**
2. Transcripts of completed programmes from last educational institution
3. Letter of Admission to Institution (**If applicable**)
4. Copy of Birth Certificate
5. Physical Examination Certificatethree (3) months or less**(If Applicable)**
6. Two Letters of Recommendation in Sealed Envelopes
7. Cover Minute from Permanent Secretary/Head of Department, endorsing the request for Training **(For Public Service Employees only)**
8. Statement of Conduct and Work Ethics Form **(for Public Service Employees only)**
9. Resume/Any Other Relevant Documentation
10. Police Record three (3) months or less**(If Applicable)**

\*\*Please note that additional documents may be required based on the level of study\*\*

Date

Signature