

## MoBay City Run – Scholarship Committee

Please **read the instructions carefully** before completing this form and answer all relevant questions. Incomplete applications will not be processed.

- Completed application forms should be submitted to the  
**Montego Bay Community College,**  
**UWI, Mona - Western Jamaica Campus** (Bursary Office),  
**UTECH Jamaica – Western campus,**  
**Sam Sharpe Teachers College,**  
**Caribbean Maritime University and**  
**Northern Caribbean University (Western).**
- **Full-time or Part-time Undergraduate** students are eligible for financial assistance. **\*\* (High school graduates can also apply)**
- Applicants are also allowed to reapply.
- Where income figures are required, gross amounts must be stated.
- **All applicants must complete** all sections.
- Please indicate 'N/A' where the information requested in an item is not applicable to your situation.
- An essay outlining why you should be considered for a scholarship **MUST** be submitted along with the scholarship application form, **please attach essay to the application**.  
**\*\*If false information is submitted the application will be revoked / investigations are carried out by the committee.**
- **The Referee's Affidavit must be submitted** with all application forms (items 98 through to 116). Kindly note the following persons from whom references may be obtained: Application will NOT be process if this section is completed by someone outside of the list provided
  - **Senior member of the academic staff (e.g. Senior Lecturer or higher)**
  - **Student Services' Managers**
  - **Guidance Counsellors (Health Center)**
  - **Justices of the peace**
  - **Ministers of Religion**
- The applicant will have to provide:
  - For On-Campus Co-curricular Activities:

a certified copy of your co-curricular transcript.

- For Off-Campus Co-curricular Activities:  
National or Community organization which states clearly-
  1. The nature of the organization;
  2. The length and nature of the applicants' involvement.
- Students who apply on the basis of involvement in campus activities **must submit**, along with the completed application form, a letter of support written by the Faculty Advisor/Student Services Manager of the club/hall/society attesting to the involvement as stated.
- Students who apply on the basis of involvement in Regional, National, Community **and** campus activities **must submit**, along with the completed application form, at letter of support written by the President, Chairman or Secretary of the said organization(s).
- A **certified co-curricular transcript** must accompany all applications.

PLEASE DO NOT SUBMIT PAGES 1&2 OF  
THIS APPLICATION FORM

DEADLINE: AUGUST 25, 2025  
LATE APPLICATION WILL NOT BE ACCEPTED

## APPLICATION FOR FINANCIAL ASSISTANCE

**Name of school you will be attending September 2025:**

---

### BIOGRAPHIC PROFILE

1. Student ID #				2. TRN #	
3. <b>NAME</b>	Title	Last Name/Surname	First Name		Middle Name(s)
4. <b>Former NAME</b> (If Applicable)	Title	Last Name/Surname	First Name		Middle Name(s)
5. Name Type of Former Name: Maiden [ ] (Prior to) Deed Poll [ ] Other [ ] Please Specify _____					
6. Date of Birth <b>dd / mm / yyyy</b>			7. Sex: Male [ ] Female [ ]		8. Marital Status
9. Country of Birth			10. Nationality		
11. Disability		12. Employment Status		13. Employer	
14. Employer's Address _____ _____					
15. Employer's Telephone _____			16. Employer's E-mail Address _____		

### CONTACT INFORMATION

<b>17. Permanent Address</b> Apt./Street/P.O. Box _____ _____ _____			<b>18. Term/Mailing Address</b> (if you reside on Hall please provide full details) Apt./Street/P.O. Box _____ _____ _____		
City/Town	Parish	Country	City/Town	Parish	Country

19. Home Phone	20. Cellular Phone	21. Contact Phone	22. E-mail Address
<b>ACADEMIC PROFILE</b>			
23. Faculty of Admission	24. Programme (B.A., B.Sc. B.Ed, Diploma etc.)	25. State your Major/Option	
26. Enrolment Status	27. Level	28. Expected Date of Graduation	
29. University			
<b>PARENTAL INFORMATION</b>			
<b>Mother or Stepmother</b> (Omit as necessary)		<b>Father or Stepfather</b> (Omit as necessary)	
30. Name		37. Name	
31. Address _____ _____		38. Address _____ _____	
32. Telephone (W)		39. Telephone (W)	
33. Telephone (H)		40. Telephone (H)	
34. Occupation		41. Occupation	
35. Employer		42. Employer	
36. Salary \$ _____ Weekly - [ ] Fortnightly - [ ] Monthly - [ ] Annually - [ ]		43. Salary \$ _____ Weekly - [ ] Fortnightly - [ ] Monthly - [ ] Annually - [ ]	
<b>SPOUSAL INFORMATION</b>		<b>DEPENDENT CHILDREN</b>	
44. Name	52. Name	53. Age	
45. Address (If Different from Applicant's Permanent Address) _____ _____ _____	54. Name of Child's School		
	55. Name	56. Age	
	57. Name of Child's School		
	58. Name	59. Age	
46. E-mail Address	60. Name of Child's School		
47. Telephone (H)	61. Other Dependent Children?    Yes [ ]                      No [ ]		
48. Telephone (W)			
49. Occupation			
50. Employer			

51. Salary \$ _____ Weekly - [ ]   Fortnightly - [ ]   Monthly - [ ]   Annually - [ ]	
--	--

### BUDGET PLANNER

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

Expenses (\$)	Income/Resources (\$)
63. Tuition Fees _____	72. Present Bank Balance _____
64. Books and Supplies _____	73. Spouse's Contribution _____
65. Accommodation _____	74. Family Contribution _____
Hall of Residence _____	75. Contribution From Other Sources _____
Off Campus _____	76. Proceeds From Employment _____
66. Food _____	77. Awards (e.g. Scholarships, Bursaries)
67. Clothing _____	Name of Award _____ Value _____
68. Toiletries _____	a. _____ (\$) _____
69. Transportation _____	b. _____ (\$) _____
To and From school _____	c. _____ (\$) _____
Field Trip _____	78. Tuition Loans (e.g. SLB etc.) _____ Value _____
70. Contingencies (Please Specify)	a. _____ (\$) _____
Item _____ Cost (\$) _____	b. _____ (\$) _____
a. _____	79. Grants
b. _____	a. _____ (\$) _____
c. _____	b. _____ (\$) _____
d. _____	80. Other Income/Resources _____
<b>71. Total Expenses</b> =====	<b>81. Total Income/Resources</b> =====

82. Shortfall (Subtract Total Expenses from Total Income)

83. Have you applied for transfer to another Faculty/Campus/University in the upcoming academic year? Yes [ ] No [ ]		
84. If yes to Ques. 89 state name of:	85. Faculty	86. Campus/University
87. Have you been awarded a Scholarship/Bursary tenable Yes [ ] No [ ]		
88. If Yes, state name of Award _____		
89. Value \$ _____		
<b>90. Co-Curricular Record</b>		

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

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

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

**\*\*It is a requirement for any recipient to serve as a volunteer in an area of your choosing in the Mobay Run City. If you are selected a list of the areas would be provided.**

### Referee's Affidavit

92. <b>NAME</b>	Last Name/Surname	First Name	Middle Initial(s)
93. Home Address			
94. Telephone (H)		95. Telephone (W)	96. E-mail Address
97. Occupation		98. Name of Employer/Business	
99. Name of <b>STUDENT</b> being recommended			
100. How long have you known him/her?		Year(s)	Month(s)
101. What do you know of the applicant's family?			
102. What do you know about the co-curricular activities of the applicant?			
103. Is this person experiencing financial difficulties?      Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]			
104. If 'yes' please explain:			

105. Would you regard the student as someone with integrity? 106. If 'yes' please explain:	Yes [ ] No [ ]
<hr/> <hr/> <hr/> <hr/>	
107. How would assistance from this office benefit the student?	
<hr/> <hr/> <hr/> <hr/>	
108. Is there any other pertinent information that you think we should know? 109. If 'yes' please explain:	Yes [ ] No [ ]
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
110. 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>  <b>MUST BE STAMPED</b>	
<input type="checkbox"/> Senior member of the academic staff <input type="checkbox"/> Student Services' Managers <input type="checkbox"/> Guidance Counsellors (Health Center) <input type="checkbox"/> Justices of the peace <input type="checkbox"/> Ministers of Religion	