



UNIVERSITY OF TECHNOLOGY, JAMAICA  
DEPARTMENT OF STUDENT FINANCING  
STUDENT WELFARE UNIT  
EARN & STUDY APPLICATION FORM  
**SEMESTERS 1 & 2**

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**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.
- Completed application forms should be submitted to the Financial Aid's Welfare Unit, Student Services Building.
- Applicants are required to attach a copy of their most recent Progress Report, School ID Card and a recent passport size photograph.
- Regular working hours on the Earn and Study Programme are between 8:00 a.m. – 4:00 p.m. - Mondays to Fridays. If you are earlier than 8:00 am, you should sign for 8:00 am.
- Students are allowed to work flexi-time including weekends, based on the nature of the operations of the Department to which they are assigned. However, they must not exceed the maximum of 50 hours per fortnight.
- All students will now be allowed to work a maximum of twenty five (25) hours per week, which will translate to 50 hours per fortnight. This does not apply to the EXPANDED STUDENTS
- The programme runs for Twenty-Two (22) weeks. Successful applicants will be engaged from Monday, September 23<sup>rd</sup> to Friday, November 22<sup>nd</sup>, 2019 and January 13<sup>th</sup> to April 10<sup>th</sup>, 2020.
- The rate of pay will be \$250.00 per hour. The rates may be higher on the Expanded Earn and Study Programme, which is funded by individual budget holders.
- The students will be paid on a fortnightly basis in Semesters 1 and 2. **Payment will be made via bank transfer; hence the data sheet for direct deposit should be completed. Please note, you will NOT be paid without this information.**

**Students are not permitted to work in both the Semesters and the Summer**

- ❖ First (1<sup>st</sup>) year students are **NOT** allowed to work in semesters 1 & 2 but can work in the summer semester of their first (1<sup>st</sup>) year.
- ❖ Final year students are **NOT** allowed to work in the semesters 1 & 2 but can work in the summer semester of their final year.

The application period for Earn and Study is as follows: 1) Semesters I & II - **July 22 - August 16, 2019** 2) Summer Semester - **March 17 – April 10, 2020**



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**1.0 STUDENT INFORMATION**

1. ID #: \_\_\_\_\_ 2. TRN #: \_\_\_\_\_  
3. Name: Mr., Miss, Mrs. \_\_\_\_\_  
Surname First Middle  
4. DOB: dd/mm/yyyy 5. Gender: Male  Female  6. Marital Status: \_\_\_\_\_  
7. Country of Birth: \_\_\_\_\_ 8. Nationality: \_\_\_\_\_  
9. Disability: Yes  No  , If yes, state: \_\_\_\_\_ 10. Employed: Yes  No

**2.0 CONTACT INFORMATION**

11. Permanent Address: _____ _____	14. Term Address: _____ _____
12. Phone(H) (____) _____	15. Phone(H) (____) _____
13. Cellular: (____) _____	16. Cellular: (____) _____
17. Email Address: _____	

**3.0 ACADEMIC PROFILE**

18. Faculty: \_\_\_\_\_ 19. School: \_\_\_\_\_  
20. Enrollment Status: Fulltime  Flexible  21a. Year of Study: 1  2  3  4  5   
21 b. GPA: \_\_\_\_\_  
22a. Transferred from a Community College? Yes  No  , If yes, state: \_\_\_\_\_  
22b. Expected Date of Graduation: dd/mm/yyyy 23. Hall of Residence: \_\_\_\_\_  
24. Have you been previously awarded a Scholarship/Bursary tenable at UTech? Yes  No   
If yes, state: Award Name \_\_\_\_\_ Value: \$ \_\_\_\_\_  
Award Name \_\_\_\_\_ Value: \$ \_\_\_\_\_  
Award Name \_\_\_\_\_ Value: \$ \_\_\_\_\_



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**4.0 PARENTAL INFORMATION**

Please circle option that is applicable

Mother/Stepmother/Caregiver		Father/Stepfather/Caregiver	
25. Name:		31. Name:	
26. Address:		32. Address:	
27. Phone(C):	Phone(W):	33. Phone(C):	Phone(W):
28. Occupation:		34. Occupation:	
29. Employer:		35. Employer:	
30. Gross Monthly Salary:;		36. Gross Monthly Salary:	

**5.0 SPOUSAL INFORMATION** **6.0 DEPENDENT(S)**

37. Name:	45a. Name	45b. Age:
38. Address (If different from Applicant's Permanent Address) _____ _____ _____	46. School	
	47a. Name	47b. Age:
	48. School	
	49a. Name	49b. Age:
39. E-mail Address:	50. School	
40. Telephone (W):	51. Other Dependent(s)? Yes <input type="checkbox"/> No <input type="checkbox"/>	
41. Telephone (H):	Please Specify _____	
42. Occupation:	_____	
43. Employer:	_____	
44. Gross Monthly Salary \$ _____	_____	

**7.0 EARN & STUDY WORK EXPERIENCE**

52. Have you ever worked on the Earn & Study Programme before? Yes  No , If yes list below

Department	Period	Academic Year
	Semester 1 and 2 <input type="checkbox"/> Summer <input type="checkbox"/>	
	Semester 1 and 2 <input type="checkbox"/> Summer <input type="checkbox"/>	
	Semester 1 and 2 <input type="checkbox"/> Summer <input type="checkbox"/>	
	Semester 1 and 2 <input type="checkbox"/> Summer <input type="checkbox"/>	
	Semester 1 and 2 <input type="checkbox"/> Summer <input type="checkbox"/>	



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**8.0 WORK EXPERIENCE**

53. Indicate jobs held within last five(5) years (including vacation and part-time employment)

Organisation Name	Position Held	From	To	Salary/Month
		dd / mm / yyyy	dd / mm / yyyy	
		dd / mm / yyyy	dd / mm / yyyy	
		dd / mm / yyyy	dd / mm / yyyy	
		dd / mm / yyyy	dd / mm / yyyy	

**9.0 SLB/PATH BENEFICIARY**

54. Did you apply to the Student Loan Bureau (SLB) for the current academic year? Yes  No

If Yes, Amount Received: Loan \$ \_\_\_\_\_ SLB Grant \$ \_\_\_\_\_

If No, Why? \_\_\_\_\_

Have you been a PATH Beneficiary? Yes  No

Please State PATH Family Registration Number : \_\_\_\_\_

**10.0 ASSISTANCE RECEIVED FROM EXTERNAL AGENCIES IN THIS ACADEMIC YEAR**

55. Have you benefitted from any of the following:

Jamaica Values and Attitude (JAMVAT) Yes  No   
 If yes, Amount Received: \$ \_\_\_\_\_ Academic Year: \_\_\_\_\_ / \_\_\_\_\_

National Youth Service (NYS) Yes  No   
 If yes, Amount Received: \$ \_\_\_\_\_ Academic Year: \_\_\_\_\_ / \_\_\_\_\_

Citizens Security & Justice Programme (CSJP) Yes  No   
 If yes, Amount Received: \$ \_\_\_\_\_ Academic Year: \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**11.0 SKILLS INVENTORY**

Name: \_\_\_\_\_

ID#: \_\_\_\_\_

Faculty: \_\_\_\_\_

Please Indicate any special skill that you possess by placing a tick (✓) in the appropriate section, which will indicate whether you are knowledgeable, have any certificates or work experience in the specific area.

	<b>SKILL AREA</b>	<b>KNOWLEDGE</b>	<b>CERTIFICATE</b>	<b>WORK EXPERIENCE</b>
1	Accounting			
2	Administration			
3	Customer Service			
4	Data Entry			
5	Computer Applications			
6	Programming			
7	Computer Networking			
8	Webpage Design			
9	Teaching			
10	Tutoring			
11	Researching			
12	Electrical Technician			
13	Mechanical Technician			
14	Carpentry			
15	Painting			
16	A/C Technician			
17	Refrigerator Technician			
18	Housekeeping			
19	Waitering			
20	Culinary			
21	Dancing			
22	Drama			
23	Life Guard			
24	First Aid			
25	Other Please Specify			
26	(a)			
27	(b)			
28	(c)			



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**12.0 SUPPORTING DOCUMENTS**

Documents Submitted

56. Applicant must attach the following documents:
- A copy of your most recent **Progress Report**
  - A copy of your **School ID** card
  - One recent passport sized photograph

**13.0 FOR OFFICIAL USE ONLY**

Registration Status [ ] Valid School ID Card [ ]  
Progress Report [ ]

Employment Period:- From (Date Start):- \_\_\_\_\_ To (Date Ended): \_\_\_\_\_

Student Welfare Officer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**14.0 PLACEMENT RANKING**

	Never Worked	Worked Once	Worked Twice	Worked Three Times	Worked Four Times
Rank	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

Comments:-



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**15.0 DATA SHEET FOR DIRECT DEPOSIT  
STUDENTS**

**GENERAL INFORMATION**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
FACULTY: \_\_\_\_\_  
ID #: \_\_\_\_\_  
TELEPHONE #: (Cell) \_\_\_\_\_ (Other) \_\_\_\_\_

**BANKING INFORMATION**

BANK NAME: National Commercial Bank (Keycard Cash)

KEYCARD CASH CARD #: \_\_\_\_\_

*NB. If you do not have a Keycard, please collect a "Prepaid Keycard Application Form" at the Student Welfare Office. **Keycards used for Lunch are eligible.***

**E-MAIL INFORMATION**

EMAIL ADDRESS: \_\_\_\_\_

**DECLARATION**

I declare that the information above is true and correct and accept responsibility for the validity of the information provided.

Signature: \_\_\_\_\_

Date : \_\_\_\_\_

**Please attach a copy of your valid School ID and proof of banking information**

**Return form to: Student Welfare Unit  
Department of Student Financing  
Financial Aid Office  
University of Technology, Jamaica  
237 Old Hope Road  
Kingston 6**