



UNIVERSITY OF TECHNOLOGY, JAMAICA

FINANCIAL AID OFFICE

GRANT APPLICATION FORM

Instruction Sheet

- Please **read the instructions carefully** before completing this form and answer **All** relevant questions. **INCOMPLETE applications will not be ACCEPTED.**
- 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 Financial Aid Office.
- Completed application forms should be submitted to the Financial Aid Office.
- You are required to submit a valid copy of your school I.D, plus copies of all the following, where applicable:

Tuition – A statement from accounts confirming the balance outstanding on your tuition

Boarding – The boarding fee breakdown sheet indicating balance

Books and other expenses - Invoice showing the cost of items/ services needed

- **Suitable Referees are: Pastors, Justices of the Peace, UTech Lecturers and UTech Middle & Senior Managers.**
- **Qualification Criteria**
The following are the general conditions which should be met in order to benefit from assistance under the Financial Aid Programme:
 - ✚ Applicants must be able to prove that s/he has exhausted or have been turned down for all other available sources of financing for reasons other than the non-payment of previous loans.
 - ✚ Persons applying should have failed no more than two courses in the previous academic year. In exceptional cases however, where it is established that lack of funds has contributed significantly to poor academic performance, consideration may be given.
 - ✚ Students are only allowed **One (1)** benefit per Academic Year, second applications will not be considered.
 - ✚ Students who have benefited from other assistance, such as SLB, Scholarships, JAMVAT,/NYS etc. will **NOT** be treated as a priority.



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1.0 BIOGRAPHIC PROFILE					
1. ID #			2. Title: Mr. Mrs. Ms. Miss Other _____(State)		
3. NAME		Last Name:	First Name:		Middle Name(s):
4. FORMER NAME <i>(If Applicable)</i>		Title:	Last Name:	First Name:	Middle Name(s):
5. Name Type of Former Name: Maiden <input type="checkbox"/> (Prior to) Deed Poll <input type="checkbox"/> Other <input type="checkbox"/> Please Specify _____					
6. Date of Birth: dd / mm / yyyy		7. Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		8. Martial Status: _____	
9. Country of Birth:			10. Nationality:		
11. Disability: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please State _____		12. Employment Status:		13. Employer:	
14. Employer's Address: _____ _____					
15. Employer's Telephone: _____			16. Employers E-mail Address: _____		
2.0 CONTACT INFORMATION					
17. Permanent Address Apt/Street/P.O. Box _____ _____ _____			20. Term Address (if you reside on Hall please provide full details) Apt/Street/P.O. Box _____ _____ _____		
City/Town:	Parish:	Country:		City/Town:	Parish:
Country:	City/Town:	Parish:	Country:		Country:
18. Home Phone:		19. Cellular Phone:		21. Home Phone:	
				22. Cellular Phone:	
23. E-mail Address: _____					
3.0 ACADEMIC PROFILE					
24. First Faculty of Admission:			25. Present Faculty:		
26. Programme:			27. State your Major:		
28. Indicate Your Enrollment Status: Fulltime <input type="checkbox"/> Evening <input type="checkbox"/> Part-Time <input type="checkbox"/>				29. Year of Study: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
30. Have you Transferred from a Community College? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state _____					
31. Expected Date of Graduation: dd / mm / yyyy			32. Hall of Residence (Residing):		
33. Have you applied for transfer to another Faculty in the upcoming academic year? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state: Faculty _____ Programme: _____					
34. Have you been previously awarded a Scholarship/Bursary tenable at UTech? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes state: Award Name _____ Value \$ _____					



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4.0 PARENTAL INFORMATION				
Mother/Stepmother/Caregiver (Omit as necessary)		Father/Stepfather/Caregiver (Omit as necessary)		
35. Name _____		42. Name _____		
36. Address _____ _____ _____		43. Address _____ _____ _____		
37. Telephone (W):		44. Telephone (W):		
38. Telephone (H):		45. Telephone (H):		
39. Occupation:		46. Occupation:		
40. Employer:		47. Employer:		
41. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[]		48. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[]		
5.0 SPOUSAL INFORMATION		6.0 DEPENDENT(S) <i>(persons who depend on you)</i>		
49. Name:		57. Name		58. Age:
50. Address (If different from Applicant's Permanent Address) _____ _____ _____		59. School		
		60. Name		61. Age:
		62. School		
		63. Name		64. Age:
51. E-mail Address:		65. School		
52. Telephone (W):		66. Other Dependent(s)? Yes [] No []		
53. Telephone (H):		Please Specify _____ _____ _____		
54. Occupation:		_____		
55. Employer:		_____		
56. Salary \$ _____ Weekly -[] Fortnightly -[] Monthly -[]		_____		
7.0 WORK EXPERIENCE				
67. Indicate jobs held within the last 5 years (including vacation and part-time employment (Earn and Study NOT included))				
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	



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8.0 BUDGET PLANNER			
68. Budget for Academic Year _____/_____			
Expenses (\$)		Income/Resources (\$)	
69. Tuition Balance (owing) _____		79. Present Bank Balance _____	
70. Books and Supplies _____		80. Spouse's Contribution _____	
71. Accommodation		81. Family Contribution _____	
a. Hall of Residence _____		82. Contribution from other Sources _____	
b. Off Campus _____		83. Proceeds from Employment _____	
72. Food _____		84. Existing Awards(e.g. Scholarships, Bursaries)	
73. Clothing _____		Name	Value (\$)
74. Toiletries _____		a. _____	_____
75. Transportation		b. _____	_____
a. To and From UTech _____		c. _____	_____
b. Field Trip _____		85. Tuition Loans(e.g. SLB, Bank Loan, etc.)	
76. Loan Payment _____		Name	Value (\$)
77. Contingencies (Please Specify)		a. _____	_____
Item	Cost(\$)	b. _____	_____
a. _____	_____	c. _____	_____
b. _____	_____	86. Grants Received from Financial Aid Office	
c. _____	_____	Type of Assistance	Value(\$)
d. _____	_____	a. _____	_____
		b. _____	_____
78. Total Expenses _____		87. Other Income/Resources _____	
		88. Total Income/Resources _____	
89. Shortfall (Subtract Total Expenses from Total Income): _____			
90. I confirm that the information provided on this form is correct:			
_____		_____	
Applicants Signature		Date (dd / mm / yyyy)	

N.B.: Information provided for the Budget Planner should be for the current academic Year only. Figures stated should represent Annual Totals; that is, income and expenses for the entire year.



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14.0 REFEREE'S AFFIDAVIT			
Please Note: This Affidavit should be completed by the Referee only.			
96. Referee Name	Last Name:	First Name:	Middle Initial(s):
97. Referee Address: _____ _____			
98. Telephone (H)	99. Telephone (W)	100. E-mail Address:	
101. Occupation:	102. Name of Employer/ Business:		
103. Name of Student being Recommended:			
104. How long have you known applicant? Year(s)_____ Month(s)_____			
105. Would you regard the applicant as someone with integrity? Yes [] No []			
106. What do you know of the financial situation of the applicant's family? _____ _____ _____ _____			
107. Is this Student experiencing financial difficulties? Yes [] No [] If 'yes', please explain: _____ _____ _____			
108. How would assistance from this Office benefit the applicant? _____ _____			
109. Is there any other pertinent information that you think we should know? Yes [] No [] If 'yes', please explain: _____ _____			
110. I hereby declare that the information provided above and by the applicant is to the best of my knowledge true.			
Signed _____		Date: dd / mm / yyyy	

N.B. - Referees should know the applicant for at least one (1) year and should be able to attest to the information provided by the applicant. Suitable Referees are: Pastor, Justice of the Peace, UTech Lecturer or UTech Senior Manager.

- All Referees are required to affix the official stamp of their Office / Department / Organization.

- The University reserves the right to verify any information provided on this form.



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15.0 ACADEMIC DISTINCTIONS AND/ OR PRIZES RECEIVED

112. State all academic distinctions or prizes received and the year.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

FOR OFFICIAL USE ONLY

Documents Submitted

_____	_____
_____	_____
_____	_____
_____	_____

ASSESSMENT COMMITTEE'S DECISION

