



**HUMAN RESOURCE MANAGEMENT DEPARTMENT
GOVERNMENT HEADQUARTERS**

CHURCH STREET * BASSETERRE * ST. KITTS

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APPLICATION FORM FOR UVI SCHOLARSHIP AWARD

INSTRUCTIONS FOR COMPLETING THIS FORM

- I. Answer Section A-G
- II. Place a tick in the appropriate box
- III. Have your Head of Department/Supervisor complete Section H.

Section A

Name of the Scholarship for which you are applying.

Course of study for which this application is being made:

Section B

Mr./Mrs./Miss _____

Surname

First Name

Middle

Other Name(s) _____

Gender:

M

F

Home Address: _____

Work Address: _____

Telephone (s): Home _____ Work _____ Mobile _____

Email Address: _____

Please indicate where you want the correspondence sent: H W

Section C

Date of Birth: _____
 Day Month Year

Age last birthday: _____

Place of Birth: _____

Nationality: _____

Section D

Total Years of Employment: _____

Current Position: _____

Division/Department Where Employed: _____

Current Position/Job Title: _____

How Long Held From: _____ To: _____

Brief Description of Duties/Responsibilities: _____

Section G

Please sign and date this application after you have completed and read the following. I hereby certify that the information given in this application is true and correct.

Applicant's Signature

Date: (DD/MM/YYYY)

Section H

To be completed by persons working for government.

Head of Department/Supervisor

Please indicate your approval of your staff member's application for further study.

Make any necessary comments to support your decision in your answer given above.

Please sign and date this form.

Signature of H. O. D/Supervisor

Date: (DD/MM/YYYY)

**Form is to be accompanied by current transcripts, birth certificate and a picture id.*

**If enrolling for the first time kindly submit an acceptance letter*