



TD1 FORM

Learning & Development - Human Resources Management Unit Office of the Deputy Governor

APPLICATION CHECKLIST

Your application must be completed and returned to the:

The Chairman,
National Training and Scholarship Advisory Committee
Human Resources Management Unit
Office of the Deputy Governor
P.O Box 292
Brades
Montserrat

Email: training.hrmu@gov.ms

You must correctly fill out the application form and **include all documents listed below. Incomplete applications will not be considered.**

Please tick documents attached:

- Completed Application Form
- Offer of Acceptance from an Accredited Institution/University
- Complete Programme Outline
- Proof of Tuition and other financial requirement from the institution including accommodation
- Two (2) Forms of Identification inclusive of passport
- Certified Copies of Qualification
- School Transcript
- Two (2) Character References (1) Academic/Professional Ability (2) General Character

Declaration

This is to certify that I, have submitted the documents as listed above and the information I have provided are true to the best of my knowledge.

.....
Candidate's Signature

.....
Date



TD1 FORM
Learning & Development - Human Resources Management Unit
Office of the Deputy Governor
APPLICATION FOR NATIONAL SCHOLARSHIP AWARD

(Please write clearly)

PERSONAL DETAILS

1. **Surname:** _____

2. **Forenames:** _____

3. **Title:** Miss/Mrs/Mr

4. **Gender:** Male/Female

5. **Date of Birth** (dd/mm/yyyy) / / and **Place of Birth:** _____

6. **Nationality:** _____

7. **Home Address:** _____

Telephone No: _____ **Email:** _____

Telephone Number where you can be reached between 8:00am-4:00pm _____

8. **Person to be contacted in case of an Emergency:**

Name: _____

Address: _____

Telephone No. _____ Email: _____

PROFESSIONAL DATA

9. Education Record:

Please attach copies (**NOT Originals**) of your academic transcripts and certificates. Indicate any courses currently being taken, expected date of completion, and the qualification to be obtained. (continue on a separate page, if necessary)

Qualification (class or level)	Area(s) of study	Grade	Date awarded	Institution and Country
<i>EXAMPLES O' Level</i>	<i>Mathematics and English</i>	<i>I</i>	<i>June 2003</i>	<i>MSS, Montserrat</i>

10. Employment History

(Please list all positions held since completing secondary or tertiary education, starting with most recent)

Job Title	Name of Organisation	Time Period (From, To)	Main Duties

11. Membership

(Please indicate what organisations you are affiliated to)

PROPOSED COURSE OF STUDY/JUSTIFICATION

12. Course or Programme Requested, Institution and Duration:

(Please indicate whether you have made application and if so, status of application. If available, attach acceptance letter):

Area of study _____

Institution _____

Duration _____

Accepted as a full time student Yes No

13. Anticipated Cost of Training (EC\$):

	Annual Cost \$	Duration Total \$
Travel Airfare	_____	_____
Tuition & other fees	_____	_____
Accommodation	_____	_____
Other costs (specify)		
(i) Books.....	_____	_____
(ii) Equipment (provide list)...	_____	_____
(iii)	_____	_____
 TOTAL (EC\$)	 =====	 =====

14. Guarantors

Please provide the names of two (2) Bond Guarantors should your application be successful:

Name	
Occupation	
Address	
Telephone No	

Name	
Occupation	
Address	
Telephone No	

15. Personal Statement:

Prepare a brief statement giving reasons for the training requested, a justification for selecting the programme including the developmental value to yourself, your organization (if applicable) and the Montserrat Community. (continue on a separate page as required) Your response should be no less than 300 words.

Signed:

Date: