THE ANTIGUA & BARBUDA BURSARY APPLICATION

**ACADEMIC YEAR 2024-2025**

#### Please complete the following Bursary application

### The Ada Moore Bursary Application

(Full-time college studies)

Have you previously received a grant from another Bursary Program? Yes\_\_\_\_ No\_\_\_\_

Bursary Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s) Received.

**SECTION A: GENERAL INFORMATION**

Family Nam

Address: Street:

 City:

 Postal Code:

Telephone #: ( ) Home

 ( ) Work

 ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell

( ) Fax

 E-mail

College you are attending/plan to attend: \_\_\_\_\_\_\_\_\_\_\_\_

College Program:

Expected Date of Graduation:

**SECTION B: INCOME SOURCES**

##  Actual Estimate

2024-2025 2024-2025

**EDUCATION INCOME** (for example scholarships, bursaries, grants, RESP’s or Loans)

Source

 Amount Received

Source

 Amount. Received

##### EMPLOYMENT INCOME

***Summer Job***

Employer:

 Amount Received Amount Received

***Academic year part-time***

Employer: Amount Received

 INVESTMENT INCOME:

 ***TOTAL INCOME***

***PARENTAL / OTHER CONTRIBUTION IF APPLICABLE ( EX: LODGING, FOOD, CLOTHING, ETC.)***

 Amounts:

**SECTION C: Check List**

|  |  |  |
| --- | --- | --- |
|   | Check List |  |
| Completed application form | Yes \_\_\_\_ |  |
| Cover letter | Yes \_\_\_\_ |  |
| Your Bio | Yes \_\_\_\_ |  |
|  |  |  |
|  | Check List | Date requested |
| Official Transcript | Yes \_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| Letters of reference (2) | Yes \_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Yes \_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |

**CERTIFICATION**

I certify that the foregoing information is correct and complete.

Signature Date