

# THE ANTIGUA & BARBUDA BURSARY APPLICATION

## ACADEMIC YEAR 2025-2026

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 Name \_\_\_\_\_

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**  
2025-2026

**Estimate**  
2025-2026

### **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**

|                            | <b>Check List</b> |
|----------------------------|-------------------|
| Completed application form | Yes _____         |
| Cover letter               | Yes _____         |
| Your Bio                   | Yes _____         |

|                          | <b>Check List</b> | <b>Date requested</b> |
|--------------------------|-------------------|-----------------------|
| Official Transcript      | Yes _____         | _____                 |
| Letters of reference (2) | Yes _____         | _____                 |
|                          | Yes _____         | _____                 |

### **CERTIFICATION**

I certify that the foregoing information is correct and complete.

Signature \_\_\_\_\_ Date \_\_\_\_\_