



For Official Use Only:

Customer ID .....

Scholarship ID .....

## GOVERNMENT OF SAINT LUCIA

### Scholarship Application Form

Scholarship Programme: .....

Institution:.....

Country where studies will be undertaken: .....

Course of Study: .....

Level of Study: PhD [ ] Graduate [ ] Undergraduate [ ] Diploma [ ] Certificate [ ]

Commencement Date: ..... Duration of Study: Years [ ] Months [ ]

1. (a) Surname: ..... 2. Date of Birth: .....

(b) First Name: ..... 3. Age: ..... 4. Sex:.....

(c) Other Names: ..... 5. Marital Status: .....

..... 6. Staff No./NIS No: .....

7. Place of Birth: .....

8. Nationality: .....

9. Home Address: ..... Postal Address: .....

Mobile#..... Work#..... Home#..... Email address: .....

10. Present Occupation: .....

Ministry/Department/Organization:.....

11. Next of Kin: Name: ..... Relation: .....

Home Address: ..... Postal Address: .....

Mobile#..... Work#..... Home#..... Email address: .....

**12. Educational Record: List most recent educational experience first**

Education Institution	Address	Years Attended From _____ To _____	Qualifications obtained if any, listing subjects and grades
a.			
b.			
c.			
d.			

**13. Employment Experience: List most recent employment experience first**

(a) Name of Employer: ..... Title and Responsibilities of your Post:

Location: ..... .....

Type of Organisation: ..... .....

Employed from: ..... To: .....

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(b) Name of Employer: ..... Title and Responsibilities of your Post:

Location: ..... .....

Type of Organisation: ..... .....

Employed from: ..... To: .....

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(c) Name of Employer: ..... Title and Responsibilities of your Post:

Location: ..... .....

Type of Organisation: ..... .....

Employed from: ..... To: .....

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**14. Provide Details of Professional or Technical Qualifications, if any: (e.g. AAT, CGA, ACCA)**

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**15. Provide Details of Special Skills, if any: (e.g. Computer proficiency, typing abilities, etc.)**

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**16. Provide details of Social, Community and Sporting Activities:**

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**17. Have you previously applied for a Scholarship?** Yes [  ] No [  ]

If yes, give the number of times and years .....

Have you been granted a Scholarship? Yes [  ] No [  ]

If yes, give year(s) and course(s) pursued:

YEAR:	COURSE:	LEVEL: (Graduate, Undergraduate, Diploma)
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.....	.....	.....
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**18. Have you applied to an Educational Institution? (If yes, give details):**

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**19. In not more than 200 words indicate your reasons for seeking training, its importance to your career and the way in which you intend to apply your training upon its completion. (Use an extra piece of paper if necessary).**

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**20. Important: All sections of this form must be completed. Application Forms which have not been fully completed, and forms not accompanied by the documentation stipulated below will not be considered.**

The documentation listed below must accompany this form.

1. Certified copies of Academic, Professional and Technical Certificates
2. Letter of Admission to Institution (if applicable)
3. Copy of Birth Certificate
4. Physical Examination Certificate
5. Two Letters of Recommendation in Sealed Envelopes
6. Cover Minute from Permanent Secretary/Head of Department, endorsing the request for Training (for Public Service Employees only)
7. Statement of Conduct and Work Ethics Form (for Public Service Employees only)
8. Resume/Any Other Relevant Documentation

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The completed Application Form should be submitted to the Training Division of the Ministry of the Public Service & Human Resource Development, First Floor, Sir Stanislaus James Building, Waterfront, Castries.