

**DEADLINE FOR CONSIDERATION FOR THE FALL SEMESTER IS THE 1ST FRIDAY IN JULY &  
DEADLINE FOR CONSIDERATION FOR THE SPRING SEMESTER IS THE 1ST FRIDAY IN  
JANUARY**

# **Bahamas Technical & Vocational Institute**

(PRIVATE SCHOLARSHIP APPLICATION FORM)

## **MISSION:**

*To provide learning opportunities that enable individuals to be globally competitive and economically independent.*

*Save and submit application via email to:*  
[funddevelopment@btvi.edu.bs](mailto:funddevelopment@btvi.edu.bs)



## **Fund Development Department**

BTVI  
Old Trail Road  
P.O. Box N-4934  
Tel: (242) 502-6321/502-6323  
Fax: (242) 393-4005



**Bahamas**  
Technical & Vocational Institute

## **Required supporting documents...**

- **Two (2) written character references**
- **Job letter (if employed, or from a parent if applicant is a minor)**
- **Copy of the relevant pages of the passport (i.e. photo)**
- **Document to establish need for financial assistance (e.g. letter of job termination, brief statement explaining reason for financial assistance, etc)**

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

STUDENT NAME: \_\_\_\_\_ ID#: \_\_\_\_\_

PROGRAMME: \_\_\_\_\_ DATE: \_\_\_\_\_

- ***ALL INFORMATION GIVEN IN THIS APPLICATION WILL BE TREATED IN STRICT CONFIDENCE AND WILL NOT BE RELEASED WITHOUT PERMISSION OR AN AUTHORIZED LEGAL ORDER.***

**ALL APPLICANTS MUST BE BAHAMIAN CITIZENS.**

**APPLICATIONS WILL BE ACCEPTED YEAR ROUND, BUT AWARDS WILL ONLY BE GRANTED FOR THE FALL & SPRING SEMESTERS.**

# PERSONAL INFORMATION:

(Please read carefully)

Male

Female

Student ID# \_\_\_\_\_ Current Semester: \_\_\_\_\_

1. Name: \_\_\_\_\_  
Last First Middle

2. Nationality: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ 4. Age: \_\_\_\_\_

5. Marital Status: Single Married Other: \_\_\_\_\_

6. Number of Dependents: \_\_\_\_\_

7. Local Address: \_\_\_\_\_

8. Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

9. P.O. Box: \_\_\_\_\_

10. Applicant lives with: Parent Guardian(s) Other: \_\_\_\_\_

11. Last School attended: \_\_\_\_\_

12. Date of Graduation: \_\_\_\_\_

13. Date of entry in BTVI: \_\_\_\_\_

14. Program of Study: \_\_\_\_\_

15. Anticipated date of graduation from BTVI: \_\_\_\_\_

16. New Student Continuing Student

17. Status: Full Time Part Time (Evening)

18. Have you applied for aid from any source? Yes No

19. If yes, Type of aid: \_\_\_ Books \_\_\_ Kits \_\_\_ Tuition \_\_\_ Uniforms

20. Type of aid presently applying for: Registration Tuition Books Kit

## PARENTAL INFORMATION:

(To be filled out by all applicants living with their parents or guardian.)

### FATHER/STEPFATHER/GUARDIAN:

Name: \_\_\_\_\_  
Last First Middle

Number of Dependent (S): \_\_\_\_\_ Ages \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Marital Status: Single Married Other: \_\_\_\_\_

Father's Income: Under - \$10,000  
\$10,000 - \$19,999  
\$20,000 - \$29,999  
Over - \$30,000

Amount of contribution towards your education: \_\_\_\_\_

### MOTHER/STEPMOTHER/GUARDIAN:

Name: \_\_\_\_\_  
Last First Middle

Number of Dependents (S): \_\_\_\_\_ Ages: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Marital Status: Single Married Other: \_\_\_\_\_

Mother's Income: Under - \$10,000  
\$10,000 - \$19,999  
\$20,000 - \$29,999  
Over - \$30,000

Amount of contribution towards your education: \_\_\_\_\_

## APPLICANTS WHO ARE EMPLOYED:

Occupation: \_\_\_\_\_

Salary: \_\_\_\_\_ Weekly: \_\_\_\_\_ Monthly: \_\_\_\_\_

Present Income: Under - \$10,000  
\$10,000 - \$19,000  
\$20,000 - \$29,999  
Over - \$30,000

Unemployed: \_\_\_\_\_ Length of time Unemployed: \_\_\_\_\_

## INTERVIEW:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## AFFIRMATION OF INTENT:

*I understand that if approved, I affirm that any and all financial assistance obtained as a result of this application will be used solely for expenses related to attendance of Bahamas Technical and Vocational Institute. I further affirm that all information on this form is true and correct.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FOR OFFICIAL USE ONLY

Date of receipt: \_\_\_\_\_ Received/Interviewed by: \_\_\_\_\_

Decision of committee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Administrative Signature: \_\_\_\_\_ Date: \_\_\_\_\_