



Application for Financial Aid

Office of Financial Aid and Scholarships:

Oakes Field Campus

P.O. Box N-4912, Nassau, N.P., The Bahamas

TELEPHONE: (242) 302-4371 OR FACSIMILE: (242) 302-4337

EMAIL: fa@ub.edu.bs / Website: <http://www.ub.edu.bs>

Northern Bahamas Campus

P. O. Box F-42766, East Grand Bahama, The Bahamas

TELEPHONE: (242) 688-5900 OR FACSIMILE: (242) 352-7987

APPLICATION DEADLINE:

Fall Semester (August) First Friday in February

Spring Semester (January) Last Friday in September

General Instructions and Application Form

OVERVIEW OF FINANCIAL AID.

University of The Bahamas seeks to ensure that no Bahamian is deprived the opportunity to earn a degree solely for financial reasons. UB seeks to achieve do this by making available to eligible students funds from the Government of The Bahamas in the form of financial aid. *The awarding of financial aid is contingent upon available funds.*

WHAT IS FINANCIAL AID?

- Financial aid is financial assistance that UB disburses to eligible students according to a measurement of demonstrated financial need.
- All expenses related to attending UB and all financial resources available to the applicant are measured to determine the amount of aid awarded.
- Financial aid does not include academic internships, research awards or grants. These must be declared as income resources available to the applicant.
- Financial aid will not be renewed beyond 3 years of full-time study for associate degrees and 6 years of full-time study for bachelor degrees.

HOW DO YOU QUALIFY FOR FINANCIAL AID?

- To be eligible for financial aid, the applicant:
 - must be a Bahamian citizen.
 - must be, or plan to be, enrolled full-time in a bachelor or an associate degree programme.
- To be considered for financial aid
 - the applicant must submit a completed financial aid application form along with all required documentation by the specified deadline.
 - the applicant's level of financial need will be assessed and the amount of aid determined based on the level of need that is calculated.
- To retain financial aid, the student must maintain a **minimum cumulative grade point average (GPA) of 2.00.**
- When making plans to attend UB, it is important to estimate the full cost of attendance in your financial planning (See sample attendance budget below). When calculating your financial aid award, your UB billing will be factored in determining the amount of aid you receive. Best measures will be taken to ensure that the aid you receive meets the difference between what you can afford to pay and your cost to attend.

SAMPLE UB ATTENDANCE BUDGET BASED ON 15 CREDIT HOURS PER SEMESTER (LOCAL TAXES, SUBSISTENCE AND HOUSING COSTS NOT INCLUDED):

	Estimated Annual Cost	Estimated Annual Cost	Estimated Total Cost
	<i>1st & 2nd years</i>	<i>3rd & 4th years</i>	<i>1-4 years</i>
Tuition and fees	\$3,700.00 per year	\$5,200.00 per year	\$17,800.00
Books and supplies	\$1,500.00 per year	\$2,000.00 per year	\$7,000.00
Total	\$5,200.00 per year	\$7,200.00 per year	\$24,800.00

OVERVIEW OF THE FINANCIAL AID APPLICATION PROCESS.

Step 1: Complete a Financial Aid application form.

Step 2: Submit completed application along with all required documentation to the Office of Financial Aid and Scholarships, Student Services Centre, Keva M. Bethel Building, Oakes Field Campus or the Office of the Vice President, Administrative Building, Northern Bahamas Campus, by the stipulated deadline.

SECTION 1: PERSONAL INFORMATION

Last Name:		First Name:		Middle Name:
Date of Birth: D _____ M _____ Y _____		Sex: Male <input type="checkbox"/>	Female <input type="checkbox"/>	Marital Status:
Place of Birth:			Citizenship:	
Permanent Address:				
House No. & Street		P.O. Box No.:		Island:
Local Address:				
House No. & Street		P.O. Box No.:		Island:
Personal E-mail Address:				
Telephone: Home:		Work:	Cell:	
UB Campus I Am Attending or Have Applied to Attend: Grosvenor Close <input type="checkbox"/>				
			Oakes Field <input type="checkbox"/>	Northern Bahamas <input type="checkbox"/>
UB E-mail Address (all official correspondence will be through your UB e-mail address):			UB Student No.:	
Emergency Contact Information:				
Name:			Relationship:	
Telephone: Home:		Work:	Cell:	
Name:			Relationship:	
Telephone: Home:		Work:	Cell:	

SECTION 2: ENROLMENT STATUS

Financial aid is available to full-time undergraduate University of The Bahamas students only.

1. I have been accepted into a UB bachelor degree programme.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. I have been accepted into a UB associate degree programme.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. My major is:	4. My UB academic advisor is:		
5. I plan to enroll in 12 or more credits in the	Fall: Yes <input type="checkbox"/> / No <input type="checkbox"/>	Spring: Yes <input type="checkbox"/> / No <input type="checkbox"/>	
6. I am the first person in my immediate family to attend college or university.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

SECTION 3: DEPENDENCY STATUS

This section is required to determine your dependency status. **Applicants must provide complete and accurate information. False declaration in this or any other section will result in the forfeiture of your financial aid.**

1. I am married.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. I turned 25 years of age before January 1 of this year.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. I am an emancipated minor as determined by a court of law.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. I depend on my parent(s) and or legal guardian(s) for financial support.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

SECTION 4: PARENT/GUARDIAN FINANCIAL INFORMATION

If you answered “Yes” to question 1, 2 or 3 in Section 3, skip Section 4 and complete all sections that follow.

Dependents are required to provide the financial information of parent(s) and/or legal guardian(s). Parent(s) and/or legal guardian(s) are expected to make a contribution to the cost of your education as calculated by a percentage of total household income. All information must be accurate and must be accompanied by verification documents as listed in the application checklist. Your responses will determine the amount of funding your family is required to contribute towards your UB expenses. The rate and percentage of household income required for your family’s contribution will vary based on the level of household income available.

FATHER/STEPFATHER/MALE GUARDIAN INFORMATION		MOTHER/STEPMOTHER/FEMALE GUARDIAN INFORMATION	
Name:	Relationship:	Name:	Relationship:
Employer:	Telephone:	Employer:	Telephone:
Occupation/Job Title:	Current Salary (Annual):	Occupation/Job Title:	Current Salary (Annual):

SECTION 5: FAMILY HOUSEHOLD INFORMATION

You must complete this section in order for the total available financial resources to be assessed when measuring the amount of aid you may receive.

All information must be accurate and must be accompanied by verification documents as listed in the application check list. Your responses will determine the amount of funding your family is required to contribute toward your UB expenses. Your family household information is required to determine factors which may impact the amount of aid you qualify to receive based on the number of people your household income supports and on other circumstances as listed below.

1. I live with my parent(s) or legal guardian(s).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. I depend on the state for financial support.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. My household has incurred major medical expenses for one of its members. <i>If you answer “yes” to this question and wish this to be taken into consideration, you must provide supporting documentation and attach it to the application.</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. My household has suffered a major disaster in the last 12 months (e.g., fire, hurricane, flood, other catastrophic event). <i>If you answer yes to this question and wish this to be taken into consideration, you must provide supporting documentation and attach it to the application.</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Number of people living in my household, including me:		
6. Number of people in my household currently attending university or other post-secondary institutions full-time including me:		

SECTION 6: ESTIMATED APPLICANT CONTRIBUTION

This section is to be completed if the applicant is employed.

NAME OF COMPANY:		
Address:	Employer:	Telephone:
Job Title:	Current Salary (Annual):	

SECTION 7: FINANCIAL AID & AWARDS

University of The Bahamas expects students to make every effort to secure all possible financial resources available to them. In the space immediately below, list all financial assistance sources for which you have applied, whether these are from public or private sources and whether they constitute loans or awards. Indicate whether the application is in progress or the award has been granted or denied.

Name of the Financial Agency/Assistance (e.g., Lyford Cay Foundation)	\$ Value of the Financial Assistance	Application in Progress	Award Granted	Award Denied
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 8: DECLARATION OF TRUE STATEMENT

This section requires your signature and, in the case of an applicant under 18 years of age, the signature of a parent or guardian.

I DECLARE THAT THE INFORMATION IN THIS APPLICATION IS TRUTHFUL AND ACCURATE. I ACKNOWLEDGE THAT PROVIDING FALSE AND/OR INACCURATE INFORMATION WILL RESULT IN THE FORFEITURE OF ANY FINANCIAL AID GRANTED BY UNIVERSITY OF THE BAHAMAS.

Applicant's Signature:

Date:

Parent/Guardian Signature (in the case of an applicant under 18 years of age):

Date:

UNIVERSITY OF THE BAHAMAS RESERVES THE RIGHT TO VERIFY ALL INFORMATION.

SECTION 9: APPLICATION CHECKLIST

- Completed Financial Aid application form.
- Proof of Bahamian citizenship (e.g., copy of relevant pages of a valid Bahamian passport).
- Proof of other awards.
- Proof of annual household income.
- Proof of indirect educational expenses (e.g., rent), if applicable.
- Proof of spouse's annual income, if applicable.
- Copy of NIB Contribution Report, if retired or unemployed.
- Proof of major medical expense or major disaster, if applicable.
- At least two (2) paragraphs of approximately 100 words in total explaining why you need financial assistance.
- BGCSE results (new UB students only).
- Copy of University of The Bahamas acceptance letter (new UB students only).
- Copy of transcript for previous semester (for current UB students and students transferring from another university).
- Copy of UB bill showing that you are registered for 12 credits or more. If you register for less than 12 credits after receiving the award, you will forfeit your award.