



Application for Private Book Award

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

Northern Bahamas Campus

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

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

EMAIL: fa@ub.edu.bs

Website: <http://www.ub.edu.bs>

Application Deadline:

Fall Semester (August) First Friday in February

Spring Semester (January) First Friday in June

General Instructions and Application Form

OVERVIEW OF THE AWARD.

Book awards are given to deserving Bahamian students who are pursuing a specific discipline or degree programme at University of The Bahamas and who are in financial need. Students who benefit from these awards are assessed on the basis of UB's financial need criteria. Book awards do not cover the cost of tuition and fees; they provide assistance with the cost of books only.

Students who are interested in applying for a Book Award should visit UB's website to see the list of available awards and specific award criteria.

HOW DO YOU QUALIFY FOR A BOOK AWARD?

To be eligible, the applicant must:

- be a Bahamian citizen;
- be enrolled in a UB bachelor or associate degree programme;
- be enrolled, or plan to be enrolled, in at least 12 credit hours each semester;
- meet any additional criteria as specified by the donor of the Book Award for which he/she applying;
- complete and submit this application with all of the required documentation by the stipulated deadline.

OVERVIEW OF THE APPLICATION PROCESS.

Step 1: Complete the Private Book Award application form.

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

**ALL AWARDS ARE CONTINGENT UPON AVAILABLE FUNDS.
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

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:
Telephone: Home:		Work:	Cell:	
Personal E-mail Address:				
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 (once enrolled, all official correspondence will be through this 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

Awards are 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 enrol 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: APPLICANT PROFILE

The book award for which I am applying is:
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CAREER ASPIRATIONS

My career aspirations are:

ACADEMIC ACHIEVEMENT

My current cumulative grade point average (GPA) is:

SECTION 4: 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 5: PARENT/GUARDIAN FINANCIAL INFORMATION

If you answered “Yes” to question 1, 2 or 3 in Section 4, skip Section 5 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 6: 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 college or other post-secondary institutions full-time including me:		

SECTION 7: 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 8: 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 9: PERSONAL STATEMENT

Using approximately **250 words**, attach a statement that explains why you require assistance in the form of a book award.

SECTION 10: 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 SCHOLARSHIP AND/OR AWARD GRANTED BY UNIVERSITY OF THE BAHAMAS.

Applicant's Signature:

Date:

Parent or Guardian Signature (of applicant under 18 years of age):

Date:

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

SECTION 11: APPLICATION CHECKLIST

- Completed 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 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.
- Personal statement of approximately 250 words explaining why you need a book award.
- 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 the number of credits for which you are registered. If you register for fewer than the required number of credits, you will forfeit your award.
- Any additional documentation as required by the donor.