

## **Sixth Form Scholarship Application Form**

2012

Please write clearly in BLOCK LETTERS in pen.				
	Personal Da	ta		
Name:				C. If the Manager
Last name/ Family name/ Surname (Enter exactly as appears on official do	ocuments)	First name	Middle name (complete)	Suffix (Jr., III, etc.
Date of Birth:/		;	Sex: ○ male ○ female	
Citizenship:	Social Sec	urity number:	Print the number on your Belize Social S	ecurity Card
Permanent Home address:				
Num	ber and street name	Village/City/Town	District	
Mailing address (If same as home address, leave blank):	ber and street name /P.O. Box #	Village/City	/Town District	
Telephone Number: Cell Numb	Oer:(If none, Leave Blank)	_ Email addre	(If none, Leave B	lank)
	Family			
<u>Household</u>				
With whom do you make your permanent home	e? O Mother O Legal Guardi		r O Both (Mother	
Number of brothers and sisters:			ole in household:	
Please fill out all applicable information with the informa information of one of your parents, leave section blank.				_
<u>Mother</u>				
Mother's Name:				
Last name/ Family name/ Surname (Enter exactly as appears  Telephone Number: Cell Num		First name Fmail addr	Middle name (complete)	
(If none, Leave Blank)	(If none, Leave Blank)		(If none, Leave Blank	)
Occupation		Full Time	<ul><li>Part Time</li></ul>	
Name of employer		Monthly Salary		
<u>Father</u>				
Father's Name:				
Last name/ Family name/ Surname (Enter exactly as appear Telephone Number: Cell Num		First name Email addr	Middle name (complete)	Suffix (Jr., III, etc.)
(If none, Leave Blank)	(If none, Leave Blank)	<del>_</del>	(If none, Leave Blank	)
Occupation		ull Time	<ul><li>Part Time</li></ul>	

Guardian						
Name:						
Telephone Number:	Surname (Enter exactly as appears on official documents)  Cell Number:	First name Email add	Middle name (complete)	Suffix (Jr., III, etc.)		
(If none, Leave Blank						
Occupation		O Full Time	=			
Name of employer	ame of employer Monthly Salary					
	Educational F	Particulars				
	Laucationari	ar ticular s				
Name of current or most recent						
Entry date://	Graduation Date	(If you are still in High School, put expe	ected graduation date)	_ /		
Address of High School:			Day Month	rear 		
Principal's Name: Mr./Mrs./Ms	Number and street name	Village/City/To	own	District		
Telephone Number:	Last name/ Family name/ Surname (Enter exact		First name			
(If none, Leave Blank			(If none, Leave Blar	ık)		
Program of Study:		_				
GPA: 1 <sup>st</sup> Form:	2 <sup>nd</sup> Form:	3 <sup>rd</sup> Form:	4 <sup>th</sup> Form	:		
Current Extracurricular activities	If your school does not use a GPA system, please insert	the percentage grade you received for each				
Current Extracurricular activities	Please include all activities, sports	, clubs, and volunteer work				
Name of Sixth Form you wish to	attand					
Name of Sixth Form you wish to		lled in a Sixth Form, please put name of cu	urrent school here			
Desired program of study at sixth						
If you are current	tly in a Sixth Form, please include a	Sixth Form transcript w	vith this application form.			
	Signat	ure				
	3151141					
I certify that all information submitted.	ed in the admission process—includin	g the application, the pe	rsonal essay, any supplements, a	and any other		
	ork, true, and honestly presented. I ui		•			
	at all necessary documents are attach y Future Aspirations" (iv) Acceptance					
teacher (vi) Copy of Parents TD4/inc		,	, , , .	, ,,,,		
c: .			D	,		
Signature:		_	Date:/	_ / Year		
	For Official	Use Only				
Date Application Received:	Officer:	Braı	nch Office:			
Checklist of Documents:						
O Copy of valid SS Card		O Acceptance le	tter from Sixth Form			
O Copy of High School Transcript		<ul><li>Letter of recor</li></ul>	mmendation from Principal o	or teacher		
O 500 word type written essay en	titled "My Future	O Copy of Paren	ts TD4/income statement			
aspirations"		O Cover letter				