

Water Authority – Cayman

SCHOLARSHIP FUND - APPLICATION FORM A

	Applicant							
Date of	of Birth (dd/r	nm/yr):						
Maili	ng Address:_							
Street	Address:							
Email	· <u> </u>			Tel #	‡s:			
Propo	sed Area of	Study:						
Propo	sed Degree/	Estimated (Completion Dat	te:				
Institu	ition of Stud	y:						
Estim	ated Annual	Cost of Stu	dy (attach supp	orting docu	ıments):			
Name of Institution			Period of Qualifications Other relevant information					
III. IV.	References	s: List nam	f your updated nes of three perser references)		st one must	be ac	ademic/business,	
	Name Position Institution/Or		ganization	Contac Informati		Relationship to Applicant		

V.	Personal Statement of Objectives: Please state your goals for self development and how you propose to achieve them in $400 - 500$ words.								
VI.	Personal Statement of Need: Pleconsider your request for funding you	ase state why the Water Authority should ar education in 400-500 words.							
	cant Signature	Date							

VII. For Official use: (a) Applicant Rating: (b) Recommendation of Scholarship Committee: Signed: Chairperson Member Member Member



Water Authority - Cayman

SCHOLARSHIP FUND - APPLICATION FORM B

Reference Form

Instructions: Section I is to be filled in by the applicant **and** the reference person. Section II is to be filled in by the reference person **only** then mailed/delivered in a sealed envelope to the Water Authority.

I.	Personal	l Inf	ormat	ion:
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Name of Student:		
Course of Study:	Institution:	
Name of Referee:		
Occupation:	Employer:	
Mailing Address:		
Street Address:		
Email:	Tel #s:	

II. Reference Information:

(a) Please rate this applicant on a scale of 1-5 in the following areas. (5 is the highest rating. * = unable to comment)

		*	1	2	3	4	5
1	Ability to use the English language orally						
2	Ability to use the English language in writing						
3	Academic/Organizational performance						
4	Academic/Organizational potential						
5	Appearance						
6	Attitude towards peers/co-workers						
7	Attitude towards study/work						
8	Attitude towards authority						
9	Dependability						
10	Determination						
11	Flexibility						
12	Health						
13	Industry						
14	Initiative						
15	Responsibility						

(b)	How	long	have	you	known	the	applicant	and	in	what	capacity?
(c)	Please	e comn	nent on	your a	ssessmen	it of th	ne applicant	on a p	ersor	nal leve	1.
_											
(d)					nent of the has app		oplicant's l	ikeliho	od f	or suc	cess in the
(e)		d you r espons		end thi	is applica	nt for	financial as	ssistano	ce? F	Please c	omment on
Sig	gned							Date			



Water Authority – Cayman

SCHOLARSHIP FUND - APPLICATION FORM C

Grade Release Form

By signing this form, the applicant agrees to provide the Water Authority - Cayman with full disclosure of his/her academic performance for the duration of the course of study, by submitting official transcripts at the end of every semester. Failure to adhere to this requirement will result in funds not being disbursed for subsequent semesters.

I	of
(Print Applicant Nam	(Postal Address)
grades at the end of every semester, and accept that this is one of the re-	Authority – Cayman with an official transcript of my for the duration of my course of study. I understand quirements of the scholarship and that my failure to rt being withdrawn and the bond being called in at the Cayman.
Applicant Signature	Date
Witness (name & signature)	Date
Director Water Authority - Cayman	Date