

SCHOLARSHIP DUE: FRI, APRIL 5, 2024 NO EXTENSIONS.

You Must Submit Only One Application Per Applicant. Duplicate Applications Are Not Allowed!
Please note that scholarships are available only to residents of Hanover, Jamaica

NEW APPLICANT CHECKLIST

To be considered, you must submit ALL the supporting documents below with your application:

- ___ Completed and signed application form
- ___ Passport size photo affixed on cover page (Please write your name on back of photo)
- ___ **Official** transcript for previous school year
- ___ Current report card with most recent grades (**unofficial**)
- ___ Exam Certificates (CXC, CAPE, GCSE etc.)
- ___ Recommendation from employer, teacher/principal, JP or pastor
- ___ Acceptance letter from institution (**if not already a registered student at the school**)
- ___ Financial status (In the form of **any one** of the following: financial statement of account from school or school's portal, copy of your pay slip or pay slip of person supporting you)
- ___ Essay: In 500 words or less, clearly explain how this scholarship will assist you in achieving your career dreams and goals.

RENEWAL APPLICANT CHECKLIST

To be considered, you must submit ALL the supporting documents below with your application:

- ___ Completed and signed application form
- ___ Passport size photo affixed on cover page (Please write your name on back of photo)
- ___ **Official** transcript for previous school year
- ___ Current report card with most recent grades (**unofficial**)
- ___ Acceptance letter from institution (**if not already a registered student at the school**)
- ___ Financial status (In the form of **any one** of the following: financial statement of account from school or school's portal, copy of your pay slip or pay slip of person supporting you)
- ___ Essay: In 500 words or less, clearly explain how this scholarship will assist you in achieving your career dreams and goals.

PLEASE HAND-DELIVER completed scholarship application NO LATER THAN Friday April 5, 2024. Please address and deliver it to EITHER 1 OR 2 below:

1. Katrin Casserly, Chair, Hanover Charities C/O Round Hill Hotel and Villas Hanover.
(Drop-off is at the security gate by Round Hill any day of the week) OR
2. Katrin Casserly, Chair, Hanover Charities, Hopewell Sports & Community Centre, Hopewell, Hanover. (Mondays to Fridays- 9AM - 3PM) Please call our HC Manager at 876-495-7554 before delivering to Hopewell Sports and Community Centre.

NO EMAILS ACCEPTED. Only applicants studying abroad are allowed to submit applications via email to katrinc@hanovercharities.com

PERSONAL INFORMATION

First name: _____ Last name: _____

Date of birth: ____dd____mm____yyyy Age: _____

Place of birth (Town, Parish): _____

Current address: _____

Permanent Home Address: _____

Town, Parish: _____

Parent (mother) /Guardian name: _____

Parent (father) /Guardian name: _____

I live with my: father / mother / guardian / on my own (circle one)

Parent/Guardian Phone Number (specify whose): _____

Parent/Guardian Address: _____

Please provide us with the best way to contact you:

Phone: _____ E-Mail **(mandatory)**: _____**EDUCATIONAL INFORMATION**

High School / last educational institution attended: _____

Year Graduated: _____ GPA: _____

Institution for which this scholarship will be used:

Address of Institution for which this scholarship will be used:

Please select one: __I am currently attending this institution / __ I intend to attend this institution.

Your Student ID # at institution which scholarship will be used: _____

Field of Study: _____ GPA: _____

If already attending, year in college: _____ Expected year of graduation: _____

Living arrangement: ____On campus ____Off campus ____Commuting from home

School fee PER YEAR (tuition only): _____Additional expenses PER MONTH (please list on separate sheet if necessary):

Books: _____ Board: _____ Transportation: _____ Others: _____

Please note this is an official document. All questions must be completed. Incomplete applications will not be processed.

JOB HISTORY (please list on separate sheet if necessary):

Please list your current and /or past employment info:

Company & Position:

Dates of employment:

Salary per month:

FINANCIAL INFORMATION

Does anyone financially support you at this time? Yes/No

If yes, name and relationship to you: _____¹

Who is his/her employer / position held? _____

What is his/her estimated income (annually)? _____

Are you applying for student loans Y/N? Is loan from Student Loan Bureau Y/N?

Please list amount of current loan for which you have applied: _____

Please list total amount of any previous student loan balance: _____

OTHER INCOME (please list on separate sheet if necessary):

Have you applied to other institutions for a scholarship? Y/N Currently receiving? Y/N

Please list scholarships or grants for which you have applied and amount:

Please list any other sources of income not listed above (for example, summer employment):

Source: _____ Amount: _____

Source: _____ Amount: _____

SPECIAL CIRCUMSTANCES (please list on separate sheet if necessary):

Please describe any special circumstances about which the scholarship committee should be made aware: _____

HONOURS RECEIVED (please list on separate sheet if necessary):

Please list any awards or honors that you have received: _____

OTHER SCHOOL/CHURCH/VOLUNTEER ACTIVITIES (please list on separate sheet if necessary):

Provide us with information on any activities that you participate in; for example, singing in a church choir or volunteering in school library: _____

ESSAY – Please attach this in a separate document - preferably typed.

ESSAYS MUST BE COMPLETED BY BOTH NEW & RENEWAL APPLICANTS

Essays **MUST** be typed or printed neatly and submitted with completed application form.

NEW APPLICANTS: Tell us your story and your goals! In 500 words or less and in essay format, clearly explain your career dreams and goals and the financial challenges you face in funding your education.

RENEWAL APPLICANTS: Tell us your story, progress and goals! Please also include a description of how the scholarship has assisted you in the past academic year and with your academic path and personal development. 500 words minimum

Sign:

The information provided above is true and accurate to the best of my knowledge. If requested, I will provide additional documentation to support the information provided on this application.

PLEASE NOTE: Falsification of any information on this document will result in immediate termination of any award granted.

On signing I, and/or my parent/guardian allow Hanover Charities to hold and use my information submitted within the application for assessment:

Applicant signature: _____ **Date:** ____dd____mm____yyyy

If Applicant is under 18:

Parent/guardian Name (please print): _____

Parent/guardian Signature: _____ **Date:** ____dd____mm____yyyy

Please note this is an official document. All questions must be completed. Incomplete applications will not be processed.

ONLINE PAYMENTS/CHEQUES**PLEASE NOTE:**

After applications have gone through the revision process you will be advised (via the email you provided on the Cover Page) whether you have been successful or not. After you are advised Hanover Charities will then continue with the payment process.

Please read below then fill out the required information under EITHER (A) Online Payments OR (B) Cheques based on your preferred payment option.

(A) ONLINE PAYMENTS: Hanover Charities will **strictly** make online transfers directly to the **institution** that an applicant is attending if he or she is a successful awardee. Once the applicant has no outstanding documents and the institution deems it clear Hanover Charities will then make the online payment with the student's details listed. Once this transaction is done Hanover Charities will then email the student with details of the transaction so that he/she can do any requisite follow-up with the institution.

Please indicate the following for online transfer:

- Your name
- Your student ID number
- Name, number, and email of accounting contact at institution
- Your institution's name and **online banking** details. (You do not need to submit your school's banking details if Hanover Charities already has the details for your school. Please contact 876-495-7554 or admin@hanovercharities.com to verify this. Please provide all other details listed.)

OR

(B) CHEQUES: A cheque may also be written in **special circumstances**- Special consideration is **only given** to students attending a **foreign institution or a primary/secondary institution**. If applicant falls under any of these categories or for some other reason **requires a cheque to be written in an individual's name or in the institution's name**, then please indicate the following: **(Must receive prior approval)**

Name cheque to be written to (visibly) _____

Reason _____