



## Caribbean Integration Programme Bursaries 2009/2010

### Programme Overview

The Caribbean Integration Programme was conceived in 2006, with a view to promoting the movement of students across the four campuses of the UWI thereby re-kindling the spirit of regionality that had initially characterized the University in the early days of its existence.

In the academic year 2009/2010, we hope to award ten (10) bursaries valued US\$5,000 each, for students desirous of spending one semester at a campus other than their home campus. Recipients of the bursaries would use the US\$5000 to cover expenses associated with airfare, accommodation and upkeep while at their host campus. The host campus would ensure that the visiting students are accommodated on Halls of Residence and would also have an appropriate cultural programme in place.

### Eligibility:

The bursary is available to registered full time undergraduate students who:

- have completed at least two (2) semesters of study at their respective campuses;
- are not entering their final semester;
- are not pursuing a degree programme in the following faculties Law, Engineering or Medicine.

### Criteria:

The award will be based on:

- good academic achievement (minimum GPA of 3.0) in the previous year's University Examinations;
- verifiable involvement in co-curricular activities.

### How to Apply

- Applications are available from the Campus International Office located on the different campuses;
- Complete application form in full, incomplete applications will not be processed;
- Application forms should be endorsed where indicated by the head of the department which administers your major;
- Your application should be accompanied by proof of approval of the specific courses which you intend study for the semester. These courses should be approved by both home and host Faculty/Department;

**The completed application form and other required/supporting documents should be submitted to The Registry on the Cave Hill and St. Augustine Campuses or the Office of Student Financing at the Mona Campus. Applications will not be accepted after February 27, 2009.**



THE UNIVERSITY OF THE WEST INDIES  
Caribbean Integration Programme Bursaries  
APPLICATION FORM

BIOGRAPHIC INFORMATION			
<b>NAME</b>	Last Name/Surname	First Name	Middle Name(s)
Date of Birth (dd-mm-yyyy):	Sex: Male [ ] Female [ ]	Marital Status	
Country of Birth		Nationality	
CONTACT INFORMATION			
Permanent Address		Term/Mailing Address (If different from permanent address)	
Home Phone	Cellular Phone	Other Phone	E-mail Address
<b>Please provide information for a responsible friend or family member who may be contacted in case of an emergency while you are a participant in the Programme</b>			
Name			
Address			
Telephone #1		Telephone #2	
Email Address		Relation to you	
UWI ACADEMIC/FINANCIAL INFORMATION			
Faculty	Programme (B.A., B.Sc., etc.)	Major/Option	
Expected Date of Graduation	Level (2,3,etc.)	Campus	
Do you have outstanding UWI fees? Yes [ ] No [ ]			If yes, state amount outstanding \$

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<b>Co-curricular Activities</b>
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<b>Caribbean Integration Programme Details</b>
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Application for Academic Year:	Semester 1 [ ] Semester 2 [ ]	Host campus:
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Please detail the courses you will study at the host campus. You are required to provide documentary evidence that approval for each of these courses has been granted by the local and host Faculty/Department.

Course Code	Course Title
1.	
2.	
3.	
4.	
5.	
6.	

**Why do you want to participate in the Caribbean Integration Programme?**

**Why do you want to go to the campus you have indicated?**

I certify that I have read and understood the instructions necessary for properly completing this application and that all information given is true and accurate

----- Signature of Applicant	----- Date
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**Comments of Head of Department**

How will participation in this programme be of value to this student?

General Conduct of Student:

Please make your recommendation regarding the student's request to participate in this programme:

----- Name of Head of Department/Nominee	----- Signature	----- Date (please affix official stamp)
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**Assessment by Faculty Dean**

Do you concur with the comments made by the HoD?	YES [ ]	NO [ ]
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Please make your recommendation regarding the student's request to participate in this programme:

----- Name of Dean/Nominee	----- Signature	----- Date (please affix official stamp)
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**FOR OFFICIAL REGISTRY/OSF USE ONLY**

**Documents Submitted**


**Assessment Committee's Decision**