



**THE UNIVERSITY OF THE WEST INDIES ALUMNI**

**BARBADOS CHAPTER (formerly GUILD OF GRADUATES)**

P.O. Box 64, Bridgetown, Barbados BB 11000 Office Hours: Saturdays 2:00 pm – 6:00 pm  
Telephone: (246) 417-4577 Email: uwiaa@uwichill.edu.bb

**MEMBERSHIP APPLICATION FORM**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NO (H) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

OCCUPATION \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ TELEPHONE NO (W) \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_

**ACADEMIC QUALIFICATIONS:**

**UNIVERSITY OF THE WEST INDIES QUALIFICATIONS:**

- CERTIFICATE: Year/Faculty/Major) \_\_\_\_\_
- DIPLOMA (Year/Faculty/Major) \_\_\_\_\_
- BA/BSC (Year/Faculty, Major) \_\_\_\_\_
- MA/MSc (Year/Faculty/Major) \_\_\_\_\_
- PHD (Year/Faculty/Major) \_\_\_\_\_
- (LLB/LLM ((Year/Faculty/Major) \_\_\_\_\_

**OTHER QUALIFICATIONS:** \_\_\_\_\_

**EXTRACURRICULAR ACTIVITIES AND SKILLS YOU COULD OFFER THE ASSOCIATION:**

**MEMBERSHIP IN OTHER CLUBS AND ORGANISATIONS:**

**DATE:**

**SIGNATURE OF APPLICANT:**

**OFFICE USE ONLY  
SIGNATURE OF UWIAA OFFICER:**

Lifetime Membership  
(\$60.00)