

THE UNIVERSITY OF THE WEST INDIES

School for Graduate Studies and Research

APPLICATION FOR THE UWI GRADUATE SCHOLARSHIP EMOLUMENT

Each Graduate Scholar is required to complete Section A of this form at the beginning of each quarter of the academic year (i.e. September 1, December 1, March 1, June 1) and to ask his/her Head of Department and Supervisor to complete Section B and return to the Registrar. The Registrar will then ask the Bursar to pay emoluments in accordance with the terms of the Award.

This Emolument Form should reach the Campus Office of Graduate Studies and Research as soon as each quarter begins in order to facilitate prompt payment. No emoluments will be paid unless the relevant Progress Report Form is completed and signed by Student and Supervisor(s).

| | SECTION A |
|--|---|
| NAME OF STUDENT: | |
| STUDENT ID NO.: | |
| FACULTY: | |
| PROGRAMME: | |
| NAME OF CHIEF SUPERVISOR: | |
| ACADEMIC YEAR IN WHICH SCHOLARSHIP AWARDED: | |
| | |
| Signature of Student | Date |
| | SECTION B |
| I certify that this student is pursuing gradua | te work in the Department of under my |
| Supervision and to my satisfaction and I | ecommend that he/she be paid emoluments for the Quarter beginning |
| · | |
| Signature of Chief Supervisor | Date |
| Signature of Head of Department | Date |
| Certified for payment by: | |
| Director, Graduate Studies and Research | Date |

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