

**The University of the West Indies**

ST. AUGUSTINE, TRINIDAD & TOBAGO, WEST INDIES

**DIVISION of STUDENT SERVICES and Development**

**Financial advisory Services DEPARTMENT**

Telephone: (1-868) 662-2002 Ext. 84185; 82360; Fax: 663-0052 Email: [UGbursaries@sta.uwi.edu](mailto:UGbursaries@sta.uwi.edu)

**SPORTING EXTRA CURRICULAR ACTIVITIES FORM**

(ONE FORM PER ASSOCIATION, CLUB OR SPORT)

**Academic Year: 2023/2024**

\*This form and all supporting documents must be completed and submitted with your online application or by email to [UGbursaries@sta.uwi.edu](mailto:UGbursaries@sta.uwi.edu) no later than the **Application Deadline:** **May 31, 2023**.

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| **Student UWI ID #:** | Student UWI ID # here. |
| **Name:** | Full name here. |
| **Address** | Address here. |
| **Sex:** | Male  Female  Non-Binary  Other  Not Listed  Unknown |
| **Faculty:** | Please select faculty here. |
| **Degree Programme:** | Degree programme here. |
| **Degree Level:** | 1  2  3 4 5  ***(MEDICAL SCIENCES ONLY!)*** |
| **Phone contact(s):** | Phone contact here. |

**SPORTING INFORMATION**

**Please indicate the name of the activities, the organization/club/association, and the periods of engagement.**

This form must be stamped and signed, and applicants must provide supporting documents to confirm their participation in the activities stated hereunder. Examples of supporting documents include a letter in support of your activity from a **recognized** club, association and/or organization; certificates, newspaper articles and pictures.

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| **Sport:** Sport here | **Affiliated Clubs/Association etc.:** Club/association here. |

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| |  |  |  |  | | --- | --- | --- | --- | | 1. **Rank your sporting achievements over the last four years from 1-5 (1 being the best):** | | | | |  | EVENT TITLE | EVENT OF DATE | ACHIEVEMENT (POSITION FINISHED/TIME/SCORE/ RANKING) | | 1. | Event here. | Date here. | Achievement here. | | 2. | Event here. | Date here. | Achievement here. | | 3. | Event here. | Date here. | Achievement here. | | 4. | Event here. | Date here. | Achievement here. | | 5. | Event here. | Date here. | Achievement here. | | |  | | --- | | 1. **What are your sporting aims for the next year?** | | 1. Sporting aim here. | | 1. Sporting aim here. | | 1. Sporting aim here. | | 1. Sporting aim here. | | 1. Sporting aim here. | | | | | | 1. **What are your academic aims for the year?** | | | | | 1. Academic aim here. | | | | | 1. Academic aim here. | | | | |  | | | | | 1. **How would a scholarship help you achieve your sporting and academic aims?** | | | | | Click or tap here to enter text. | | | |   **OTHER SPORT-RELATED INFORMATION**  (Please indicate any sport-related engagements that occurred within the last four years such as training seminars/workshops, development courses and media interviews.)   |  |  | | --- | --- | | **SPORT-RELATED ACTIVITY** | **DATE** | | Sport-related activity here. | Date here. | | Sport-related activity here. | Date here. | | Sport-related activity here. | Date here. | | Sport-related activity here. | Date here. | | Sport-related activity here. | Date here. |  |  |  | | --- | --- | | I certify that the information provided in this Application for a Scholarship/Bursary is complete and accurate. | | | Student Signature: Shape  Description automatically generated with low confidence | Date: Date here. | |
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| **Sport Representative Signature** | **Association/Club/ Organization Stamp** |

**Do not submit this form until you have gathered all other required documents to avoid delays in processing.** When all required documents have been gathered, upload your information into the designated area on the online application form or by email to [UGbursaries@sta.uwi.edu](mailto:UGbursaries@sta.uwi.edu) .

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| **Comments/ Staff Initial:** Comments and initial here. |