

SCHOLARSHIP APPLICATION

APPLICATION CHECKLIST - Documentation that must be submitted with this application:

Cover Letter

- Completed application form
- Proof of Caymanian status or Permanent Residency
- □ Passport-sized photo (in color)
- □ Official college transcript
- Examination certificates/results available at time of application
- Letter from college or university stating academic costs i.e. tuition, books, exams, etc.
- □ Two completed academic references
- One personal reference

Please submit this completed application form along with the required documentation no later than May 31, 2025

SECTION 1 APPLICANT'S INFORMATION

Applicant's Full Name	
	_Nationality
Local Mailing Address	
	_Cell
Email Address	
Overseas Mailing Address	
Overseas Phone: Home	 _Cell
Name of Parent/Guardian	
Address	
	Work
Email Address	

SECTION 2 EDUCATION DETAILS

High School (Transcripts must be submitted)

School Name and Country	From	То

Leaving certification type (e.g., High School Diploma)

Academic Honors achieved (Please list below)

Achievement	Dates
	<u>.</u>

CGIBRITCAY

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University Information (Transcripts must be submitted)

Undergraduate University Name and Country		From	То
Physical Address			
Website Address			
Degree Programme enrolled in			
Estimated Graduation Date	Number of years already Completed		
Graduation Requirements			

Academic Honors achieved (Please list below)

Achievement	Dates

Extracurricular Activities (Please list below)

Organisation and/or Activity	Dates

SECTION 3	ESTIMATED COSTS FOR ACADEMIC YEAR		
Tuition Fees			
Cost of Book	S		
Exam Fees			
Accommoda	tion		
Food and Ho	usehold Expenses		

Total Programme Cost

How do you intend to cover remaining costs not covered under scholarship OR how do you intend to cover costs if scholarship application is not successful?

Have you submitted application for any other scholarship funding?

If Yes, please give details or where applications have been submitted _____

🗆 Yes 🛛 No



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SECTION 4 EMPLOYMENT AND WORK EXPERIENCE HISTORY (If applicable)

Employer Name	
From	
Reason for Leaving	
Job Title	
Responsibilities	
Employer Name	
From	_To
Reason for Leaving	
Job Title	
Responsibilities	
Employer Name	
From	_ To
Reason for Leaving	
Job Title	
Responsibilities	

SECTION 5 PERSONAL STATEMENT

In a brief statement please explain why you are deserving of the CG BritCay Insurance Scholarship and any personal circumstances that you believe should be taken into consideration when reviewing your application.



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SECTION 6 REFERENCE DETAILS	
Name	
Title/ Position of referee	
Relationship to you	
Telephone No Email Address	
Name	
Title/ Position of referee	
Relationship to you	
Telephone No Email Address	
Name	
Title/ Position of referee	
Relationship to you	
Telephone No Email Address	
SECTION 7 DECLARATION	
I am a Caymanian (Please attach proof)	🗆 Yes 🗖 No
I have been ordinarily resident in the Cayman Islands full time for the five years prior to starting m	-
undergraduate studies for this scholarship I declare that the above particulars included in this application are correct to be best of my knowl	□ Yes □ No
understand that false or materially misleading statements may lead to the refusal or withdrawal of	
I understand that failure to comply with the terms and agreement of this Scholarship may lead to	suspension or forfeiture.
Signature of Applicant Date	
SECTION 8 BRITCAY USE ONLY	
Date of Application Submission: Confirmation Receipt Sent: 🗆 Yes Date:	
Date of Interview:	
Panel Members:	
Panel Recommendation:	
Panel Comments:	
Decision Notification Letter Sent: 🛛 Yes Date:	
British Caymanian Insurance Company Limited BritCay House, 236 Eastern Ave, George Town, Grand Caym	nan, Cayman Islands
PO Box 74, Grand Cayman, KY1-1102 Cayman Islands Tel 345 949 8699 Fax 345 949 8411 www.CGCoralisle Personal and Business Insurance	
INSURANCE HEALTH PENSIONS LIFE	
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