



Scholarship Application Form

For applicants of Corozal District, Belize

This application is required annually.

Date: _____

Name of Applicant: _____ Date of Birth: _____

Address: _____ Phone: _____

Email: _____

Name of School _____ Major: _____

Form/Level (circle one): 1st Form 2nd Form 3rd Form 4th Form Jr. College

With whom does the applicant live? _____

Parents'/Guardians' names: _____

Sister and Brothers living at home:

Name	Age	Year in School
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you receiving help/scholarship from other individuals or organizations? Yes No

If Yes, Name of Organization or Individual: _____

Please attach the following documents to the application:

- A letter telling us about yourself, your family, and why you want a scholarship.
- A picture of yourself, or we will make arrangements to have your picture taken.
- A copy of your grades from previous semester in school.
- A letter of acceptance from the high school if attending 1st Form (or 1st year of Jr. College or ITVET Training School)
- A recommendation letter from a teacher or someone other than a family member. They should explain how they know you, why you deserve a scholarship, and their contact information (email address).

I give permission for this information to be given to the scholarship committee, and shared with individuals and organizations that will be contributing to my education.

Applicant's Signature: _____ Date: _____

Completed applications can be emailed to: ServingWithGraceMinistries@gmail.com