

**THE DEVONSHIRE PARISH COUNCIL
SCHOLARSHIP FALL 2020**



The Scholarship Package contains the following:

Page 1	Instructions & Conditions
Pages 2-3	Application Form
Page 4	Parent/ Guardian's Confidential Financial Statement
Page 5	Student's Statement of Tuition, Fees and Other Expenses

*Mail Completed Applications to:
The Devonshire Parish Council
P.O. Box DV 52 Devonshire, DV BX
Attention: Scholarship Committee*

Or submit via email at: dpcscholarship@gmail.com

INSTRUCTIONS & CONDITIONS

1. Prior to awarding any Scholarship, in addition to the application form and Personal Financial Statement, the Selection Committee will require:
 - a) a copy of the candidate's passport;
 - b) a letter of acceptance or proof of enrollment from the applicants selected educational institution;
 - c) an official copy of the candidate's academic transcripts;
 - d) 2 reference letters (1 personal and 1 academic / or professional);
 - e) current resume outlining educational, professional and extra-curricular experiences;
 - f) parent/ guardians to provide two recent pay stubs and a copy of a current utility bill;
 - g) a letter from the candidate's parent / guardian accepting responsibility for additional funds over and above the scholarship allowance necessary to maintain the recipient at the selected educational institution;
 - h) for mail submitted applications: application and documents must be submitted in triplicate;
 - i) for email submitted applications; application and supporting documents must be submitted together as ONE pdf document; and
 - j) shortlisted candidates to be available to interview in person during the requested interview period.
2. The recipient of the Scholarship may hold other financial awards or bursaries provided that he or she discloses this to the Selection Committee and provided that the aggregate value of such awards or bursaries is not in excess of \$10,000.
3. The Selection Committee reserves the right to withdraw the Scholarship if the work or conduct of the recipient is unsatisfactory.
4. The recipient will be required to deliver to the Selection Committee, at the end of the academic year, official transcripts from the selected educational institution outlining the scholar's academic performance. **Failure to do so will result in forfeiture of further funding.**
5. The recipient will be expected to be available for a brief award presentation.
6. The Scholarship will be awarded in the form of a Bermuda Dollar cheque or online transfer.

Submit queries to: The Devonshire Parish Council Scholarship Committee
email: dpcscholarship@gmail.com

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SCHOLARSHIP FALL 2020**

APPLICATION FORM

Application and required documents are to be submitted no later than
Friday 10 July 2020

Undergraduate

Graduate

Bermuda College

1. Name of Applicant: _____
Email Address: _____
Telephone No.: _____

2. Date of Birth: _____

3. Place of Birth: _____

4. Address (Bermuda): _____

Year's resident at address: _____

Previous address if less than 5: _____

5. Name(s) of Parents/Guardians: _____

6. Do you possess Bermudian Status? _____

7. Secondary School(s) / College(s) attended

Name	From Date	To Date

8. Have you been admitted to, or are currently enrolled at a college/university for the upcoming academic year? Yes No

9. If yes, name and address of Institution: _____

10. Degree being pursued: _____

11. Provide a brief history of your community involvement, including the names of persons who can verify your participation.

12. Write one paragraph for each (using the space below):

(a) Explain the importance of your chosen area of study in today's society.

(b) Describe your short- and long-term career ambitions.

13. Please indicate if you have applied or are the recipient of any other scholarships or bursaries below:

<u>Name of Scholarship</u>	<u>Awarding Body</u>	<u>Amount</u>

**THE DEVONSHIRE PARISH COUNCIL
SCHOLARSHIP FALL 2020
PARENT/GUARDIAN'S CONFIDENTIAL FINANCIAL STATEMENT**

Total annual household income from salaries etc. _____
**Please provide aggregate amount for 2+ persons*

Other income (dividends, rents, interest, etc.) _____

Do you own your own home or other property? Yes No

If no, what is your monthly rental expense? _____

Current value of home and all other properties _____

Total annual household expenses (use last year's amounts):

Food	
Clothing	
Transportation	
Mortgage Payments	
Insurance	
Medical/ Dental bills	
Tele/Communications (Internet, Cable, etc.)	
Leisure/ Entertainment (Movies, Outings, etc.)	
Other (Loans, Overdraft Payments)	
Total	

Number of dependents in college &/or private school (other than applicant) _____

Dependants in college/school receiving financial aid: _____

We certify that, to the best of our knowledge, the above information is true and accurate.

PRINT: Names of Parents/ Guardians _____

Signature (i) _____ Date _____

Signature (i) _____ Date _____

**THE DEVONSHIRE PARISH COUNCIL
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**STUDENT CONFIDENTIAL STATEMENT
UNIVERSITY YEAR BEGINNING SEPTEMBER 2020**

Estimate of Annual Expenses in Bermuda Dollars (BMD)

Tuition	
Other fees	
Books and other related material	
Travel expenses	
Room and board	
Other (List details)	
Financial assistance received	
TOTAL	

Given due consideration to the assistance my parents can provide, I state that my financial need is:

(Tick appropriate box): Acute Serious Average

I certify that, to the best of my knowledge, the above information is true and accurate.

I understand that, should the information provided be found to be incorrect, then any financial assistance offered may be withdrawn.

PRINT Name _____

Signature _____ Date _____