

ACADEMIC (COMMUNITY) GRANT Application Form



MBJ Airports Limited with the support of its SIA partners invites interested community based organizations operating within St. James to submit applications for MBJ's Community Grant.

Your application for funding will be evaluated according to the information you provide on this form. Use extra sheets if necessary.

Ensure ALL applicable supporting documentation are submitted with your application. Applications will be considered as incomplete without these documents. Incomplete applications will not be reviewed by the evaluation committee.

■ General Information

Full Name :

Place Of Birth : Gender : Male Female

Date Of Birth : Nationality :
D D M M Y Y Y Y

Address :

Phone Number :

E-mail Address :

Name of grant recipient (if different from applicant) :

Name of grant recipient (if different from applicant) :

■ Personal Statement (to be completed by upper secondary and tertiary applicants).

There is a need to invest in individuals that are willing to add value to the growth and development of their family, community and country. Describe your involvement in a community/school based project that demonstrates your ability to collaborate with others by thinking critically about problems within your space and creatively finding solutions to solve them. **This should be a project within your community or school that you have ACTUALLY helped to execute. (You may use additional sheets).**

THANK YOU FOR YOUR INFORMATION



Lined area for notes or information.

THANK YOU FOR YOUR INFORMATION



I declare that the information given on this form is true and that any funds received would be solely for use on the project as detailed above.

I further agree to participate in an evaluation conducted by MBJ Airports Limited six months after the payment of any award outlining how the grant was spent and the impact on my academic pursuits.

Pictures of the recipient receiving the grant may be used by MBJ Airports Limited for future public communication relative to the disbursement of grants and the impact on individuals. Please indicate your willingness to allow the use of your photo image for PR materials: Yes No

Please include a copy of Airport Pass ID.

I agree to provide proof of relation in case of a dependent being shortlisted for Grant consideration.

I agree to provide the committee with a signed testimonial from a Justice of the Peace or School Administrator having knowledge of my financial need if requested by the committee in support of my application.

Signature of Applicant/Parent

Date

Please submit applications to:

MBJ Airports Limited
MBJ Inclusivity Grant
Sangster International Airport
C/o Commercial Department (Departures Terminal)
876-952-3124
Email: teamsangstergrant@mbjairport.com

