

# TEAM SANGSTER GRANT

— ACADEMIC APPLICATION FORM



## GENERAL INFORMATION

MBJ Airports Limited with the support of its SIA partners invites interested members of the Sangster International Airport community to submit applications for MBJ's Team Sangster Academic Grant.

**Please read the application guidelines carefully. 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.

## PERSONAL INFORMATION

|   |   |  |                |   |                                     |
|---|---|--|----------------|---|-------------------------------------|
| Surname   | : | <input type="text"/>                         | First Name     | : | <input type="text"/>                |
| Place of Birth  | : | <input type="text"/>                         | Date of Birth  | : | <input type="text"/><br>D D M M Y Y |
| Full Address  | : | <input type="text"/><br><input type="text"/> |                |   |                                     |
| Contact #   | : | <input type="text"/>                         | E-Mail Address | : | <input type="text"/>                |
| Name of SIA Employee                                  | : | <input type="text"/>                         |                |   |                                     |
| Company Employed                                      | : | <input type="text"/>                         |                |   |                                     |
| Name of Grant recipient (if different from applicant) | : | <input type="text"/>                         |                |   |                                     |

## 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 handwritten notes or information.

THANK YOU FOR YOUR INFORMATION



## CONFIDENTIAL FINANCIAL INFORMATION

The funds available for financial aid are limited. In order to distribute the awards in the most equitable manner, each applicant's need for financial assistance must be carefully evaluated. If you are an adult/independent of your parents, please detail your own income. A copy of your most recent pay receipt. Please feel free to present further details on a separate sheet of paper.

**Monthly Household Income** :

**Monthly Household Expenses** :

**Total Number of Dependents** :

**Please provide a brief statement of the financial challenges being faced that impact your ability to adequately provide for your (or your child's) academic expenses.**

THANK YOU FOR YOUR INFORMATION



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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 SIA Employee**

\_\_\_\_\_  
**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](mailto:teamsangstergrant@mbjairport.com)

THANK YOU FOR YOUR INFORMATION

