| Application for Grant |
| --- |
| *bARBADOS ASSOCIATION OF MUSLIM LADIES’ STUDENT GRANT APPLICATION FORM* |
|  |
| NAME OF APPLICANT : |
| Address of Applicant : |
| Date of birth: | Phone: | Cell: |
| Email: |
| PARENTS’ NAME | Father: | Mother: |
| Parents’ Address |  |
| Parents’ Contact # |  |
|  |
| EDUCATION |
| NAME OF SCHOOL | YEAR | Qualifications |
|  |  |  |
|  |  |  |
| EXTRA CURRICULAR ACTIVITIES |
|  |
|  |
|  |
| REQUEST FOR GRANT |
| Amount Requested:  |
| Will you be able to re-pay the amount requested?[ ]  Yes [ ]  No [ ]  Portion (please state) |
| Purpose of funds requested:  |
|  |
|  |
| Signature of Applicant: | Date of Application: |
| *I certify that the above information submitted is true and correct* |

|  |
| --- |
| documents to be submitted with application |
| 1. One passport sized photo [ ]
2. A letter of acceptance of documents showing the on-going course of study at a tertiary institution [ ]
3. Copies of certificates [ ]
 |

|  |
| --- |
| *for official use* |
| DATE APPLICATION RECEIVED : |
| SIGNATURE OF RECEPIENT:  |
| Application Approved [ ]  | Application Not Approved [ ]  |
|  |
|  |
|  |
|  |
|  |