

Bachelor Tuition Scholarship 2019 Application Form

The Bachelor Scholarship covers tuition only.

FULL NAME:	Mr.	Mrs.	Miss	
 First		Middle		Last
DATE OF BIRTH: D	D	MM	YR	
HOME ADDRESS:				
EMAIL:				
CONTACT NUMBER(5): (H)	(C) _		(W)
PERSON TO CONTAC	T IN CASE OF EM	ERGENCY:		
Name:				
Address:				
Contact Number(s):				
Relationship to you:				

PROFESSIONAL DATA:

7. Please list the certificates and diplomas which you have received (Start with the most recent). Be sure to submit copies of ALL, inclusive of any awards received.

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8. Membership in any professional or civic associations
9. Employment History: (if applicable, include name and location of company, job title, duration of
employment – starting with the most recent).
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- Certified copy of Associates' Degree
- > ONE official transcript from the Junior College attended
- > Birth certificate or any other proof of Belizean citizenship
- > **<u>TWO</u>** completed BTB Scholarship Recommendation Forms
- > A page which describes your career goals and aspirations
- > Your 2018 acceptance letter into the Tourism Management Program

* Deadline for submission of documents is Friday, June 14th, 2019



Scholarship Recommendation Form

Recommender Information
Name: Email:
Phone: Position:
Name of organization:
1. How long have you known the applicant and in what capacity?
2. What do you consider to be the applicant's strengths or talents?
3. What do you consider to be the applicant's weaknesses?
4. What are your general comments of the applicant's overall performance? Please identify academic or work related problems which needed attention in the applicant's personal development. (Please answer on next page.)
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Skills and Attributes	Strength	Acceptable	Weakness
Acceptance of responsibility	[]	[]	[]
Acceptance of suggestions and criticism	[]	[]	[]
Assertiveness	[]	[]	[]
Attention to duty	[]	[]	[]
Creativity	[]	[]	[]
Attendance and Punctuality	[]	[]	[]
Recognition of need for help	[]	[]	[]
Self confidence	[]	[]	[]
Speed of work	[]	[]	[]
Accuracy of work	[]	[]	[]
Technical knowledge	[]	[]	[]
Communication Skills (Verbal)	[]	[]	[]
Communication Skills (Written)	[]	[]	[]
Ability to take the initiative	[]	[]	[]
Organization and planning	[]	[]	[]
Ability to learn	[]	[]	[]
Judgment	[]	[]	[]
Dependability	[]	[]	[]
Leadership skills	[]	[]	[]
Adaptation to rules and policies	[]	[]	[]

Please give us your appraisal of the applicant in terms of the qualities listed below.

In summary, I (Please check one.)

 \Box strongly recommend \Box recommend with some reservations \Box do not recommend

Signature	of	Recommender:
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Date:



Scholarship Recommendation Form

Recommender Inform	ation	
Name:	Email:	
Phone:	Position:	
Name of organization:_		
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Organization and planning	[]	[]	[]
Ability to learn	[]	[]	[]
Judgment	[]	[]	[]
Dependability	[]	[]	[]
Leadership skills	[]	[]	[]
Adaptation to rules and policies	[]	[]	[]

Please give us your appraisal of the applicant in terms of the qualities listed below.

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Date: