



**MINISTRY OF EDUCATION AND HUMAN RESOURCE DEVELOPMENT
APPLICATION FOR ASSISTANCE – EDUCATION TRUST FUND**

Write clearly using BLOCK LETTERS.

SECTION 1 – Your General Information

*				
Title	First Name	Initial	Last Name	Alias or Nickname
Physical Address*				
Email Address			Telephone Numbers*	
Relationship to Beneficiary*				

*Mandatory boxes – Information for these areas **MUST** be provided

SECTION 2 – Beneficiary’s/Child’s Information

Complete **ONLY** if student is presently at or will be attending **Secondary School**

*				M	F
Title	First Name	Initial	Last Name	Gender*	
Physical Address*					
Email Address			Date of Birth*		Age*
Telephone Numbers			High School*		Form*
Mother’s Name					
Father’s Name					

*Mandatory boxes – Information for these areas **MUST** be provided

SECTION 3 – Request

Please place a tick in the box (es) that you require assistance.

CXC/GCE Examination Fee		Please list the items for assistance in order of need/priority
School Registration Fee		
School Transfer Grant		
Transportation		
Text Books		1.
		2.
		3.

The Board of Directors of the Education Trust Fund is responsible for the approval of applications.
Assistance may be given in one or more areas at a time.

