



The Trinidad & Tobago Association of Ottawa

P.O. Box 8401 Station T Ottawa ON K1G 3H8

tandtassociation@gmail.com

www.ttao.ca

TTAO Scholarship Application Form – 2023

All applicants who complete this form will be considered for **both** the **C.L.R James** and **Serviam** scholarships. For those applicants who **also qualify** for the **Dr. Sade Francois Scholarship for Young Black Women**, and the **A.T. Tolley Afro-Caribbean Female Scholarship** please ENSURE **Question #6A** and/or **Question #6B** have been checked – for further detail, refer to **Appendix A and Appendix B** in the Scholarship Guidelines document.

1. Name:		
	(Surname)	(Given Names)
2. Permanent Address:		
3. E-mail address		
4. Mailing Address (if different from above):		
5. Telephone nos.:	Home:	Cell:

6A. Please indicate whether you are eligible for and applying to the **Dr. Sade Francois Scholarship for Young Black Women** (30 years of age or younger) []

6B. Please indicate whether you are eligible for and applying to the **A.T. Tolley Afro-Caribbean Female Scholarship** []

7. If **18 years old and over**, please advise whether you are a TTAO member? Y () N ()

If you are **not yet** a member, you can become one by registering. Please see the **eligibility section** under the Scholarship Guidelines.

8. If less than 18 years old, please provide the name under which the family membership is registered and indicate your relationship to said member.

9. List educational institutions attended, presently attending or plan to attend. Please attach a copy of transcript or official evidence of last level completed. You are reminded that your course of study must lead to a **diploma, first degree, or post graduate degree.**

Name of School/Institution	Address	Year(s) attended	Level/s Completed

10. Start date of new semester:

11. Field of Study (Degree/Diploma sought):

12. Outline your plans for your future career or profession:

13. Please provide the names and occupations of two references. These references must provide a letter of recommendation, which includes the date, his/her address, contact information and signature and **prepared no later than three (3) months prior to the date of your application**. These letters must be submitted with your application.

References:

(i) _____

(ii) _____

14. Give a description of your extracurricular activities, interests, and any other information that you feel will be relevant to your application. If more space is required, use a separate sheet of paper. The sheet **must have** your **name, signature, and question number** at the top. A typewritten response is encouraged.

Optional:

15. If you would like your financial or familial circumstances to be considered, please provide a brief description on this application form. Where possible, refrain from using identifying information, e.g., describe the circumstance without the use of names. If more space is required, use a separate sheet of paper. The sheet **must have** your **name, signature, and question number** at the top. A typewritten response is encouraged.

Date: _____

Signature: _____