



The Trinidad & Tobago Association of Ottawa

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C.L.R. James Scholarship Application Form – 2018

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

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

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

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

7. 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 **first** degree or diploma.

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

9. Start date of new semester: _____

10. Degree/Diploma sought: _____

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

12. 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. **These letters must be submitted with your application.**

References:

(i) _____

(ii) _____

