



**ANNUAL  
MINISTRY OF TOURISM  
SCHOLARSHIP**

***Scholarship Criteria,  
Guidelines &  
Application Form***





## ANNUAL MINISTRY OF TOURISM SCHOLARSHIP CRITERIA & GUIDELINES



### Background

This Scholarship represents an effort on the part of the Ministry of Tourism to get more Caymanian involvement in the tourism sector, particularly at the managerial level. It is designed in particular for students who demonstrate a **financial need**, and who wish to pursue a Bachelor's Degree in **an approved tourism or tourism-related discipline**. Consideration will also be given to students who wish to pursue a Masters degree in an approved tourism or tourism-related discipline.

### Criteria for the Grant of the Cayman Islands Ministry of Tourism Scholarship

In awarding this scholarship, the following criteria will be taken into account. Candidates must:

- 1) *Be Caymanian or hold Caymanian Status.*
- 2) *Have proof of having resided in the Cayman Islands for 5 years prior to application for a scholarship. They should present a letter from their most recent school or from parent's employer.*
- 3) *Produce proof of acceptance at a nationally accredited institution ranked competitive or higher.*
- 4) *Be at least 17 years of age.*
- 5) *Be studying a program in a tourism or tourism related field.*
- 6) *Be in good health and of good character. Two letters of character reference are required: one academic and one from a non-relative should be attached to the application.*

### Guidelines for the Management of the Cayman Islands Ministry of Tourism Scholarship

*Please initial each guideline to indicate that you have read, understood and accept the terms of the Scholarship Program.*

1. The Scholarship is offered annually for eligible candidates (See Scholarship Criteria) to pursue an approved tourism or tourism-related course of study at a *nationally accredited institution ranked competitive or higher*. \_\_\_\_\_
2. All institutions attended by scholarship awardees will be sent a letter signed by the Director of Tourism and the student authorizing the release of grade reports and any other pertinent information, to the DOT. However, scholarship awardees must also send a grade report to the Director of Tourism at the end of each school term prior to the release of the next term's funds. \_\_\_\_\_
3. Students must maintain **at least a 2.5 cumulative grade point average**, with no failures, in a minimum of 12 credit hours in one term in the **first year of study**, and **at least a 3.0 cumulative grade point average**, with no failures, in a minimum of 15 credit hours thereafter. **Failure to do this may result in the immediate termination of the scholarship.** \_\_\_\_\_
4. Students in institutions that do not have a detailed reporting system must have a satisfactory tutorial assessment. **Failure to achieve this may result in the immediate termination of the scholarship.** \_\_\_\_\_
5. The **award of funding for each term** will be authorized only if the previous term's grade report/progress report meets the minimum standards as set out in items (3: Minimum GPA Requirements), and (4: Institution's Reporting System) above. \_\_\_\_\_



**ANNUAL MINISTRY OF TOURISM**  
**SCHOLARSHIP CRITERIA & GUIDELINES**  
**Continued**



6. Scholarship students may receive funds **up to US\$7,000** for one summer during the course of the scholarship to continue the approved course of study, **provided study is a requirement of the institution** and not as a result of failures, or loss of credit due to change of major or institution, or reducing course load to part-time. **Requests for summer funding must be requested 4 months prior to the summer courses being taken.** Applications for summer funds will be reviewed by the Scholarship Committee and decisions communicated by the Department of Tourism (CIDOT).
7. Scholars are **required** to gain practical experience in their proposed discipline by completing at least one eight (8) week-internship during their studies. The internship may be taken at any point during the completion of their program, and a summary report of the experience should be sent to the Department of Tourism.
8. Students **must complete the course of study in the time stated in the scholarship award.** Extensions caused by course failures, unapproved change of major, unapproved change of institution, or loss of course credit for any other reason unacceptable to the Ministry of Tourism, Environment, Investment and Commerce will be at the student's expense.
9. The Ministry **must approve transfers from one institution to another or from one major to another.** All transfers must fall within the scholarship criteria term (1) listed above. Letters requesting the change must be submitted to the Scholarship Committee **prior to making the change.** Failure to achieve this will result in the funds being withheld until a decision is made by the Scholarship Committee to approve the request.
10. Students are required, prior to receiving ANY scholarship funds, to sign a bond with **two (2) sureties** requiring them, upon completion of their studies, to return to work in the tourism Industry in the Cayman Islands for the period of time equivalent to the duration of their scholarship. **No two members of the same household** will be accepted as sureties.
11. If a student fails to complete the course of study due to non-compliance with any of the conditions of the bond, or if the scholarship is withdrawn on the grounds of non-compliance, **the Ministry will call upon the student or his sureties to repay the sums, plus interest, expended by the Ministry on behalf of the student.** Interest will be calculated based on the prevailing Cayman Islands prime rate on date repayment is demanded.  

The Ministry reserves the right to demand immediate payment of the full balance plus interest accrued thereon, or may elect to allow the said amount to be paid in monthly instalments over an agreed period of time.
12. If upon successful completion of the course of study, a student refuses an offer of employment in a tourism or tourism-related position in the Cayman Islands, or to return to the island to work for the period of time stated in the bond, the Ministry will call upon the student or his sureties to repay the sums, expended by the Ministry on behalf of the student, under the same conditions outlined in (11) above.
13. Students are not allowed to combine this scholarship with any other government scholarship programme such as scholarships issued by the Education Council.

**THE APPLICATION DEADLINE FOR 2008 AWARDS IS FRIDAY, 1 MAY 2009**

All Applications must be clearly marked **Scholarship Application** and sent to:

Deputy Director – Product Development

Department of Tourism

PO Box 67, Grand Cayman, KY1 – 1102

Applicants short-listed for an award will be interviewed, and all applicants contacted thereafter. For further information please contact Racquel Brown – Manager for Tourism Development Services at the Department of Tourism (CIDOT) by telephone at 949 0623 or by email at [rbrown@caymanislands.ky](mailto:rbrown@caymanislands.ky).

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPLICANT'S CHECKLIST OF ENCLOSURES**

**Please ✓ check each box when each enclosure has been completed!**

	➤ Completed Official Scholarship Form (Printed in Black or Blue Ink or Typed)
	➤ One full face passport sized photograph
	➤ Personal Statement
	➤ Scholastic Records e.g. copies of Exam Certificates, Diploma and SAT
	➤ Applicant's Résumé
	➤ Birth certificates/ Status or Adoption Documents for Parents and Applicant
	➤ Institution's letter of acceptance or provisional letter of acceptance
	➤ Institution's costs covering: tuition, board, meal, and other fees
	➤ Sealed References on Correct Form (2)
	➤ Medical Report and Examiners Report (signed & sealed by Doctor)
	➤ Completed University Data Form and Supporting Documents
	➤ Completed Surety Forms (2) with Job Letter and Bank Statements

Please sign and date this form once **all enclosures** have been completed & attached:

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE NOTE: The application form will not be processed if all of the above documents are not provided by the deadline FRIDAY, 1 MAY 2009.**

For official use only – Do not write in this space!			
Date Application Received:		Application Complete?	
Interview (Date):		Evaluated by Ministry:	
Evaluated by Panel:		Approved by Ministry?	
Recommended or Defer?		Reason Applicant Has Not Been Recommended:	
Date Written Response Sent to Applicant:			

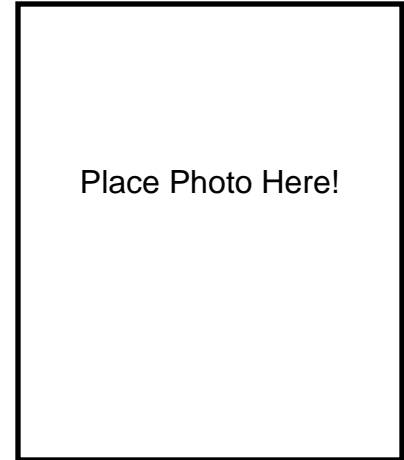
**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION**

1. Applicant's Full Name: \_\_\_\_\_  
\_\_\_\_\_

2. Proposed Field of Study: \_\_\_\_\_  
\_\_\_\_\_

Please list the department or programme to which you are applying, including the details of your degree major and minor: \_\_\_\_\_  
\_\_\_\_\_



3. University/College Requested: \_\_\_\_\_

4. Applicant's Cayman Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Numbers (Home, Work & Cell): \_\_\_\_\_

Email: \_\_\_\_\_

5. Applicant's Alternate Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Numbers (Home, Work & Cell): \_\_\_\_\_

Email: \_\_\_\_\_

6. Marital Status: \_\_\_\_\_

7. Date of Birth: \_\_\_\_\_

8. Secondary/ Tertiary Schools attended with dates: \_\_\_\_\_  
\_\_\_\_\_

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION Continued**

9. Dates, grades and subjects of any senior examination passed (*i.e.* CXC, General Certificate of Education/General Certificate of Secondary Education, high school diploma etc. Please attach copies of relevant certificates).

Examination	Subject	Grade	Dates

10. SAT scores: Verbal \_\_\_\_\_ Mathematics \_\_\_\_\_  
 Year taken \_\_\_\_\_ (Please attach a copy)

11. Probable duration of course \_\_\_\_\_  
 (Please attach details of programme and cost.)

12. Number of years already completed? (if any) \_\_\_\_\_

13. On completion of your intended course, what kind of work would you like to do upon return to the Cayman Islands? Please note that you are required to return to the Cayman Islands and work within the tourism industry as per term (12) in the Scholarship Guidelines.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION Continued**

---

14. Parents'/Guardian's full name, including maiden name, nationality, address, telephone and email contact. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Period of Parents'/Guardian's residence in the Cayman Islands. Please provide proof!  
From 19 \_\_\_\_\_ to \_\_\_\_\_

16. Name and address of:  
(a) Principal of High School at present or last attended by the applicant:  
\_\_\_\_\_  
\_\_\_\_\_

(b) Two persons **other than relatives** who know the applicant well and to whom application may be made for character references: (These can include tourism officials, clergy, pastor, teachers and persons of similar calibre).

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION Continued**

---

- (c) Please provide the names of two (2) persons who have been contacted and have agreed to be sureties for the student bond. **No two members of the same household can be sureties:**

**Name:** \_\_\_\_\_ **Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Email:** \_\_\_\_\_

18. I/We have read the requirements and guidelines of this document for scholarship from the Cayman Islands Ministry of Tourism and fully understand the commitment expected of me/us. I/We agree to the terms of the Bond as described in the Scholarship Guidelines in return for the award of scholarship.

I/We declare that the above particulars are correct to the best of our knowledge and belief, and I/we understand that false statements may lead to the refusal or withdrawal of the candidate's scholarship award.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**PERSONAL STATEMENT**

---

In a brief statement, describe your background, your past work experience, and your plans for studying a professional career. Where applicable, highlight any work experience or studies in a tourism or tourism related field. If you are not currently enrolled in an academic programme, please describe any activities that you have participated in that would help the committee understand your desire to pursue a career in tourism.

Please type your statement on letter size paper, attach it to this form and, return it with your application by **FRIDAY, 1 MAY 2009** to:

**Deputy Director – Product Development**  
Department of Tourism  
Regatta Business Park  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102

Applicant's Full Name: \_\_\_\_\_

Proposed Field of Study: \_\_\_\_\_

University Chosen: \_\_\_\_\_

Applicant's Cayman Address: \_\_\_\_\_

Phone Numbers (Home, Work & Cell): \_\_\_\_\_

Email: \_\_\_\_\_

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

**UNIVERSITY DATA FORM**

1) University to which you have applied (Please attach letter of acceptance). \_\_\_\_\_

\_\_\_\_\_

2) Name, Address, Phone, and Email for University Contact (admissions or bursar):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3) What method(s) did you use in deciding to apply to this university?

	Told By Friend/Family		Teacher/Counsellor
	College Handbook/Guide		Direct Approach
	Other (Please Specify)		

4) What resource did you use to research and decide on this university or program?

_____	Barron's	Pg. No. (S)	_____
_____	Petersons	Pg. No. (S)	_____
_____	Other <small>(Please list other sources)</small>		

5) How is the University/College rated based on Barron's or Petersons?

\_\_\_\_\_ Highly Competitive \_\_\_\_\_ Competitive

6) What are the entry requirements for this institution? Please attach supporting documentation.

\_\_\_\_\_

\_\_\_\_\_

7) Have you received counselling on this career choice? \_\_\_\_\_ Yes \_\_\_\_\_ No

8) If yes, from whom?

	Teacher		Career Advisor/Counsellor
	Parent		Cayman Islands Student's Association
	Other: <small>(Please list other sources)</small>		

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**UNIVERSITY DATA FORM Continued**

---

---

9) What are some strong points of this institution, with specific reference to your major?

---

---

10) Is your chosen degree listed as a major programme or school in this university?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

Please tell us why you chose this specific program at this specific university:

---

---

---

11) What is the university's international student population? \_\_\_\_\_

12) Please detail all of your graduation requirements: \_\_\_\_\_

---

---

---

I/We declare that the above particulars are correct to the best of our knowledge and belief, and I/we understand that false statements may lead to the refusal or withdrawal of the candidate's scholarship award.

**Signature of Applicant** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_

Please Return This Form With Your Scholarship Application **by FRIDAY, 1 MAY 2009.**

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

## **APPENDIX I: SCHOLARSHIP REGULATIONS**

---

---

### **Regulations Governing the Disbursement and Accounting of Scholarship Funds**

A FULL scholarship will be awarded for a maximum period of four (4) years, up to a monetary amount of US\$25,000 per Academic Year. Students may be awarded PARTIAL scholarships at the Committee's discretion. All funds will be disbursed by CIDOT and must be accounted for by **ALL** recipients as follows.

Please initial each item to indicate that you have read, understand and accept the stated terms.

#### **1. Mandatory Fees**

Mandatory University expenses and fees will be covered under the scholarship. These include ***Tuition, Medical, Student Insurance and any Other Prescribed University Fees***. These will be paid on a term basis and students will be required to provide original invoices from the University to the Department of Tourism listing these amounts. **These invoices should be provided at least (4) weeks in advance of the due date to ensure the timely processing of fees.** \_\_\_\_\_

#### **2. Projected Expenses and Claim Forms**

Students **are required to** complete and sign the official **Projected Expense Form (Form I)** prior to any funds being disbursed. Original receipts and invoices must be supplied and attached to the completed official **Expense Claim Form (Form II)**. **All receipts must be affixed to a sheet of paper** (tape or staple) according to the related expense category (meals/ food, rent/ utilities, books, airfare. For each expense category, **students must show an itemized list** of amounts spent and the total of each category must be clearly indicated. \_\_\_\_\_

#### **3. Students Living On Campus**

Students are expected to live in campus provided accommodations and take up the meal plan offered by the University. In this instance, the University charges for these costs will be included in their invoices and these will be paid on a term basis, when the mandatory fees are being paid. \_\_\_\_\_

#### **4. Students Living Off Campus**

Where a student elects to live off campus in rented accommodation, they will be provided a fixed monthly living allowance of ***US\$1,000 per month to cover off campus living costs*** including Rent, Food and Utilities. This allowance would be paid on a term basis and ***recipients will need to account for the expenditure of these funds*** with original receipts and invoices. Please note that **only bills for land lines will be paid, cellular bills are not to be included.** \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPENDIX I: SCHOLARSHIP REGULATIONS Continued**

---

---

**5. Book/Equipment Allowance**

An advance for books or equipment will be given based on the projected costs provided by the University. Equipment would cover items such as lab coats, knives and other essential items required for the completion of lab-based or practical courses. Original receipts with details of books/equipment purchased would be required to account for this allowance, before any additional advances are given. \_\_\_\_\_

**6. Airfare**

Students will be allowed **one return airline ticket** to Cayman from the nearest gateway to their University per annum. You would be required to fly economy and by the most direct route. \_\_\_\_\_

**7. Miscellaneous Expenses**

All students, whether staying on or off campus, will be given a ***monthly incidental allowance of US\$120***, paid per term, to cover miscellaneous expenses including inter-alia, *Transportation Charges, Travel To and From the Airport, Stationery Purchases and Phone Calls. Receipts for these purchases must be provided with your expense claim.* \_\_\_\_\_

Notwithstanding the above, **total disbursements per annum** to any student **shall not exceed their stated award** or the standard annual scholarship figure of **US\$25,000** per academic year. \_\_\_\_\_

Please initial here to indicate that you have read, understand and accept the above terms: \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**APPENDIX II: INSTRUCTIONS FOR DISBURSEMENT OF FUNDS**

---

Attached are the following forms:

1. Projected Expense – MUST BE COMPLETED & ATTACHED
  - a. Off Campus
  - b. On Campus
2. Expense Claim – DOES NOT NEED TO BE COMPLETED AT THIS TIME
  - a. Off Campus
  - b. On Campus

**Projected Expenses:** Scholarship Applicants are required to complete the **Projected Expense Form (Form I)** that is relevant to their intended or actual living status at university – on campus or off campus.

- This form provides the Scholarship Committee with a snapshot of your anticipated expenses for **each term**.
- Applicants are asked to only provide the list and estimate of expenses for one term, while fully indicating which expenses are single payments (e.g. matriculation fees).
- If your institution uses trimesters instead of sixteen week semesters, please indicate this on the form also.
- This will form the basis of an advance payment to the Scholarship recipient.
- Tuition and other mandatory fees must be supported by an invoice from the university
- For Off Campus Students, you must provide a copy of your apartment's lease agreement.

**Expense Claim:** The Expense Claim Form is used to reconcile how the funds that were advanced were spent. It is imperative that you provide all original receipts properly affixed to sheets of paper as stated in Appendix I and outlined below for your convenience:

- Original receipts and invoices must be supplied and attached to the completed official **Expense Claim Form (Form II)**.
- **All receipts must be affixed to a sheet of paper** (tape or staples) according to the related expense category (meals/ food, rent/ utilities, books, airfare.
- For each expense category, **students must show an itemized list** of amounts spent and clearly indicate the total.

Please initial here to indicate that you have read, understand and accept the above terms: \_\_\_\_\_

**Choose the Form I that fits your accommodation choice, complete and attach this form to your application package.**

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

**FORM I: PROJECTED EXPENSES FORM – OFF CAMPUS LIVING**

Name of Recipient: \_\_\_\_\_

Year of Scholarship: \_\_\_\_\_ Projected Expense From: \_\_\_\_\_ to: \_\_\_\_\_

Name & Location of University: \_\_\_\_\_

This university's academic year is broken down into: 2 Semesters / 3 Trimesters which begin: (Please indicate the month each term begins): \_\_\_\_\_

Off Campus Living		
Expense Item	Projected Amounts Needed (US\$)	Supporting Document Must be Provided
Mandatory University Fees <i>(Tuition, Orientation, Medical etc.)</i>		
Rent/Utilities <i>(Water/Electricity/Telephone)<sup>(1)(2)</sup></i> <small>(US \$1000.00 per month paid at the start of each term, only bills for land lines will be paid, cellular bills are not to be included)</small>		
Meals/Food <sup>(1)</sup>		
Books		
Airfare (Roundtrip Fare)		
Miscellaneous <small>(US\$ 120.00 per month paid at the start of each term. <b>Receipts must be provided</b>)</small>		
<b>Total Projected Expenses</b>		

Date: \_\_\_\_\_

Signature of student: \_\_\_\_\_

Date: \_\_\_\_\_

DOT authorised: \_\_\_\_\_

<sup>(1)</sup>For Off Campus Rentals

<sup>(2)</sup>List Separately

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

**FORM I: PROJECTED EXPENSES FORM – ON CAMPUS LIVING**

Name of Recipient: \_\_\_\_\_

Year of Scholarship: \_\_\_\_\_ Projected Expense From: \_\_\_\_\_ to: \_\_\_\_\_

Name & Location of University: \_\_\_\_\_

This university's academic year is broken down into: 2 Semesters / 3 Trimesters which begin: (Please indicate the month each term begins): \_\_\_\_\_

<b>On Campus Living</b>		
<b>Expense Item</b>	<b>Projected Amounts Needed (US\$)</b>	<b>Supporting Document Must be Provided</b>
Mandatory University Fees <i>(Tuition, Orientation, Medical etc.)</i>		
University Charges <i>(Campus Accommodation./Meal Plan*)</i>		
Books		
Airfare (1 Roundtrip Fare per annum)		
Miscellaneous (US\$ 120.00 per month paid at the start of each term. <b>Receipts must be provided</b> )		
<b>Total Projected Expenses</b>		

Date: \_\_\_\_\_ Signature of student: \_\_\_\_\_

Date: \_\_\_\_\_ DOT authorised: \_\_\_\_\_

\* May be listed with University Charges -Tuition/Medical etc.

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**FORM II: EXPENSES CLAIM FORM – OFF CAMPUS LIVING**

Name of Recipient: \_\_\_\_\_

Year of Scholarship: \_\_\_\_\_ Expense Claim From: \_\_\_\_\_ to: \_\_\_\_\_

Name & Location of University: \_\_\_\_\_

This university's academic year is broken down into: 2 Semesters / 3 Trimesters which begin: <sup>(Please indicate</sup>  
the month each term begins): \_\_\_\_\_

<b>Off Campus Living</b>		
<b>Expense Item</b>	<b>Amount Spent (US\$)</b>	<b>Supporting Document Must be Provided</b>
Mandatory University Fees <i>(Tuition, Orientation, Medical etc.)</i>		
Rent/Utilities <i>(Water/Electricity/Telephone/Cable)<sup>(1)(2)</sup> (US \$1000.00 per month paid at the start of each term, only bills for land lines will be paid, cellular bills are not to be included)</i>		
Meals/Food <sup>(1)</sup>		
Books		
Airfare (Roundtrip Fare)		
Miscellaneous <i>(US\$ 120.00 per month paid at the start of each term. <b>Receipts must be provided</b>)</i>		
<b>Total Amount Spent</b>		
<b>Funds Disbursed</b>		
<b>Balance</b>		

Balance: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_

DOT Authorised Signature: \_\_\_\_\_

<sup>(1)</sup>For off campus rentals

<sup>(2)</sup>List separately

\* May be listed with University Charges -Tuition/Medical etc.

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

**FORM II: EXPENSES CLAIM FORM – ON CAMPUS LIVING**

Name of Recipient: \_\_\_\_\_

Year of Scholarship: \_\_\_\_\_ Expense Claim From: \_\_\_\_\_ to: \_\_\_\_\_

Name & Location of University: \_\_\_\_\_

This university's academic year is broken down into: 2 Semesters / 3 Trimesters which begin: (Please indicate the month each term begins): \_\_\_\_\_

<b>On Campus Living</b>		
<b>Expense Item</b>	<b>Amount Spent (US\$)</b>	<b>Supporting Document Must be Provided</b>
Mandatory University Fees <i>(Tuition, Orientation, Medical etc.)</i>		
University Charges <i>(Campus Accommodation /Meal Plan*)</i>		
Books		
Airfare (Roundtrip Fare)		
Miscellaneous (US\$ 120.00 per month paid at the start of each term. <b><u>Receipts must be provided</u></b> )		
<b>Total Amount Spent</b>		
<b>Funds Disbursed</b>		
<b>Balance</b>		

Balance: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_

DOT Authorised Signature: \_\_\_\_\_

\* May be listed with University Charges -Tuition/Medical etc.

CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM



**APPENDIX III**

**MEDICAL EXAM REPORT**



**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**MEDICAL EXAMINER'S REPORT**

---

IMPORTANT - The object of the examination is to determine that the candidate is physically and mentally fit to undertake a course of study overseas where he/she will be subject to the additional stress of living and working in a different culture and environment.

**Your opinion is confidential to the MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT and COMMERCE and should not be discussed with the candidate. This document must be signed, sealed, and submitted to the address indicated.**

A. General appearance and complexion: (e.g. consistent with stated age).

Height \_\_\_\_\_ Weight (unclothed) \_\_\_\_\_

Urinalysis - 5G \_\_\_\_\_

Sugar: \_\_\_\_\_ Albumen: \_\_\_\_\_ Deposit: \_\_\_\_\_

Eyes: \_\_\_\_\_ Visual Acuity R \_\_\_\_\_ L \_\_\_\_\_

Nose & Throat \_\_\_\_\_ Teeth \_\_\_\_\_

B. Locomotor system- Upper Limbs \_\_\_\_\_ Lower Limbs \_\_\_\_\_

C. Cardiovascular system \_\_\_\_\_ Pulse Rate \_\_\_\_\_ Arteries \_\_\_\_\_

Heart size \_\_\_\_\_ Heart sounds \_\_\_\_\_

DP systolic \_\_\_\_\_ Diastolic \_\_\_\_\_ Retinal vessels \_\_\_\_\_  
(If Hypertension present)

D. Respiratory system \_\_\_\_\_

E. Abdomen \_\_\_\_\_

Liver \_\_\_\_\_ Spleen \_\_\_\_\_ Hernial sites \_\_\_\_\_

F. Reproductive system \_\_\_\_\_

Menstrual history \_\_\_\_\_

WR, Klein or VDRL/HIV \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**MEDICAL EXAMINER'S REPORT Continued**

---

G. Central nervous systems \_\_\_\_\_ Reflexes \_\_\_\_\_

Psychiatric assessment:

Mood \_\_\_\_\_ Stability \_\_\_\_\_ Sleep \_\_\_\_\_

H. Please comment on declared medical (if significant):

I. (a) Is the candidate at present being treated for any condition? \_\_\_\_\_

Please specify \_\_\_\_\_

(b) Is the candidate likely to need further treatment overseas? \_\_\_\_\_

---

Signature of examining doctor \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Doctor/ Hospital/ Clinic Stamp:

**NOTE**

1. A chest x-ray and radiologist report is required in all cases.
2. Diseases unlikely to lead to rejection of candidate should be treated without delay and treatment completed before departure.
3. Long-standing conditions (e.g. Diabetes) will not necessarily lead to rejection of candidates, provided the condition has been stable under treatment for a sufficient length of time.

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**MEDICAL REPORT**

---

PART 1: To be completed by the scholarship applicant who is responsible for answering each question accurately. FAILURE TO DISCLOSE medical history in full may lead to rejection or cancellation of award.

A. Full name and permanent address (BLOCK CAPITALS - BLACK INK).

---

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

B. Have you had any of the following? Yes \_\_\_\_\_ or No \_\_\_\_\_

- 1. Tuberculosis \_\_\_\_\_
- 2. Pneumonia \_\_\_\_\_
- 3. Pleurisy \_\_\_\_\_
- 4. Asthma \_\_\_\_\_
- 5. Allergic disorder \_\_\_\_\_
- 6. Rheumatic fever \_\_\_\_\_
- 7. Heart disease \_\_\_\_\_
- 8. Gastric or Duodenal Ulcer \_\_\_\_\_
- 9. Recurrent Indigestion \_\_\_\_\_
- 10. Jaundice \_\_\_\_\_
- 11. Dysentery \_\_\_\_\_
- 12. Kidney or urinal complaint \_\_\_\_\_
- 13. Rupture \_\_\_\_\_
- 14. Diabetes \_\_\_\_\_
- 15. Varicose Veins \_\_\_\_\_
- 16. Epilepsy \_\_\_\_\_
- 17. Poliomyelitis or other neurological disorder \_\_\_\_\_
- 18. Nervous disorder \_\_\_\_\_
- 19. Psychiatric disorder \_\_\_\_\_
- 20. Eye disorder \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**MEDICAL REPORT Continued**

---

- 21. Ear, Nose or Throat disorder \_\_\_\_\_
- 22. Skin disease \_\_\_\_\_
- 23. Anaemia \_\_\_\_\_
- 24. Gynaecological disorder \_\_\_\_\_
- 25. Malaria or other tropical disease \_\_\_\_\_
- 26. Operations \_\_\_\_\_
- 27. Serious accidents \_\_\_\_\_
- 28. Any other serious disorder? \_\_\_\_\_

C. If any questions above answered yes, please give the following:-

(a) Year	(b) Treatment received	(c) Any recurrence or lasting effects
_____	_____	_____
_____	_____	_____
_____	_____	_____

**N.B. Doctors please note that the Scholarship Candidate must sign this form in your presence.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Witness:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return this form (sealed by the doctor) **FRIDAY, 1 MAY 2009 directly to:**

Deputy Director – Product Development  
Department of Tourism,  
Regatta Business Park  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**



**APPENDIX IV**

**FINANCIAL STATEMENT**

**&**

**BOND DECLARATION FOR SURETIES**



**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**FINANCIAL STATEMENT FOR SURETY I**

---

Name of student: \_\_\_\_\_

Name of surety: \_\_\_\_\_

Address of surety: \_\_\_\_\_

Telephone No.'s (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**INCOME INFORMATION**

Employer's Name and Address: \_\_\_\_\_

Position: \_\_\_\_\_

Salary (include allowance) p.a.: \_\_\_\_\_

Other income p. a.: \_\_\_\_\_

Total income p.a.: **CI\$** \_\_\_\_\_

**Please attach a job letter and bank statements to this form!**

**EXPENSES INFORMATION**

Mortgage p. a.: \_\_\_\_\_

Life Insurance p.a.: \_\_\_\_\_

Health Insurance p.a.: \_\_\_\_\_

School Fees p.a.: \_\_\_\_\_

Other Commitments (e.g. car loan etc.) p.a.: \_\_\_\_\_

**Total Annual Expenses:** **CI\$** \_\_\_\_\_

**DATED:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**BOND DECLARATION FOR SURETY I & SCHOLARSHIP APPLICANT**

---

**I hereby certify that the financial statement provided and the foregoing is true and correct to the best of my knowledge. I also certify that I have read the information for sureties contained in paragraph 11 & 12 of Appendix I which states:**

- 11) Students are required, prior to entering the institution, to sign a bond with two (2) sureties requiring them, upon completion of their studies, to return to work in the Tourism Industry in the Cayman Islands for the period of time equivalent to the duration of their scholarship. **Initials:** \_\_\_\_\_
- 12) If a student fails to complete the course of study due to his non-compliance with any of the conditions of the bond, or if his scholarship is withdrawn on the grounds of non-compliance, the Ministry will call upon the student or his sureties to repay the sums, plus interest, expended by the Ministry on behalf of the student. Interest will be calculated based on the prevailing Cayman Islands prime rate on date repayment is demanded. The Ministry reserves the right to demand immediate payment of the full balance plus interest accrued thereon, or may elect to allow the said amount to be paid in monthly instalments over an agreed period of time. **Initials:** \_\_\_\_\_

**I \_\_\_\_\_, as surety for \_\_\_\_\_, certify that I have read, acknowledged, understood and fully accepted my responsibilities in case of default of the student.**

**I \_\_\_\_\_, certify that I have read, acknowledged, understood and fully accepted my responsibilities in the event that I am awarded a scholarship and fail to comply with any of the scholarship guidelines set by the Ministry of Tourism, Environment, Investment & Commerce. Signed:** \_\_\_\_\_

Signed and Sealed in the presence of: \_\_\_\_\_  
Justice of the Peace/Notary Public

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Surety

\_\_\_\_\_  
Signature of Justice of the Peace/Notary Public

**Please return this form no later than FRIDAY, 1 MAY 2009 directly to:**

Deputy Director – Product Development  
Department of Tourism  
Regatta Business Park  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**FINANCIAL STATEMENT FOR SURETY II**

Name of student: \_\_\_\_\_

Name of surety: \_\_\_\_\_

Address of surety: \_\_\_\_\_

Telephone No.'s (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**INCOME INFORMATION**

Employer's Name and Address: \_\_\_\_\_

Position: \_\_\_\_\_

Salary (include allowance) p.a.: \_\_\_\_\_

Other income p. a.: \_\_\_\_\_

Total income p.a.: \_\_\_\_\_ **CI\$** \_\_\_\_\_

**Please attach a job letter and bank statements to this form!**

**EXPENSES INFORMATION**

Mortgage p. a.: \_\_\_\_\_

Life Insurance p.a.: \_\_\_\_\_

Health Insurance p.a.: \_\_\_\_\_

School Fees p.a.: \_\_\_\_\_

Other Commitments (e.g. car loan etc.) p.a.: \_\_\_\_\_

**Total Annual Expenses:** \_\_\_\_\_ **CI\$** \_\_\_\_\_

**DATED:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**BOND DECLARATION FOR SURETY II & SCHOLARSHIP APPLICANT**

---

---

**I hereby certify that the financial statement provided and the foregoing is true and correct to the best of my knowledge. I also certify that I have read the information for sureties contained in paragraph 11 & 12 of Appendix I which states:**

- 11) Students are required, prior to entering the institution, to sign a bond with two (2) sureties requiring them, upon completion of their studies, to return to work in the Tourism Industry in the Cayman Islands for the period of time equivalent to the duration of their scholarship. **Initials:** \_\_\_\_\_
- 12) If a student fails to complete the course of study due to his non-compliance with any of the conditions of the bond, or if his scholarship is withdrawn on the grounds of non-compliance, the Ministry will call upon the student or his sureties to repay the sums, plus interest, expended by the Ministry on behalf of the student. Interest will be calculated based on the prevailing Cayman Islands prime rate on date repayment is demanded. The Ministry reserves the right to demand immediate payment of the full balance plus interest accrued thereon, or may elect to allow the said amount to be paid in monthly instalments over an agreed period of time. **Initials:** \_\_\_\_\_

**I \_\_\_\_\_, as surety for \_\_\_\_\_, certify that I have read, acknowledged, understood and fully accepted my responsibilities in case of default of the student.**

**I \_\_\_\_\_, certify that I have read, acknowledged, understood and fully accepted my responsibilities in the event that I am awarded a scholarship and fail to comply with any of the scholarship guidelines set by the Ministry of Tourism, Environment, Investment & Commerce. Signed: \_\_\_\_\_**

Signed and Sealed in the presence of: \_\_\_\_\_  
Justice of the Peace/Notary Public

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Surety

\_\_\_\_\_  
Signature of Justice of the Peace/Notary Public

**Please return this form no later than FRIDAY, 1 MAY 2009 directly to:**

Deputy Director – Product Development  
Department of Tourism  
Regatta Business Park,  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**



**APPENDIX V**

**REFERENCES**

**FOR**

**SCHOLARSHIP CANDIDATE**



**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

## REFERENCE I FOR SCHOLARSHIP APPLICATION

Name of Applicant: \_\_\_\_\_

Proposed Course of Study: \_\_\_\_\_

Full Name of person giving the reference: \_\_\_\_\_

Address/ phone number/ email: \_\_\_\_\_

How long have you known this applicant? \_\_\_\_\_

What is your relationship to this applicant? \_\_\_\_\_

Please rate this applicant on a scale of 1 - 5 in the following areas.

5 is the highest rating. \* = unable to comment

	*	1	2	3	4	5
1. Ability to use the English language orally						
2. Ability to use the English language in writing						
3. Academic performance						
4. Academic potential						
5. Appearance						
6. Attitude towards peers/co-workers						
7. Attitude towards study/work						
8. Attitude towards authority						
9. Reliability/ Dependability						
10. Adaptability/ Flexibility						
11. Maturity Level						
12. Ethics/ Value System						
13. Initiative/ Motivation/ Drive						
14. Responsibility/ Leadership Ability						

Please continue reference on 2<sup>nd</sup> page attached!

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**REFERENCE I FOR SCHOLARSHIP APPLICATION Continued**

---

---

Please give your assessment of this applicant's likelihood for success in the programme for which they have applied:

---

---

---

---

---

---

Please comment on any other personal or general characteristics of this applicant.

---

---

---

---

---

I declare that the above particulars are correct to the best of my knowledge and belief, and I understand that false statements may lead to the refusal or withdrawal of the candidate's scholarship award.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this form **no later than FRIDAY, 1 MAY 2009** directly to:

Deputy Director – Product Development  
Department of Tourism,  
Regatta Business Park  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102

**CAYMAN ISLANDS  
 MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
 SCHOLARSHIP AWARD  
 SCHOLARSHIP APPLICATION FORM**

## REFERENCE II FOR SCHOLARSHIP APPLICATION

Name of Applicant: \_\_\_\_\_

Proposed Course of Study: \_\_\_\_\_

Full Name of person giving the reference: \_\_\_\_\_

Address and phone number: \_\_\_\_\_

How long have you known this applicant? \_\_\_\_\_

What is your relationship to this applicant? \_\_\_\_\_

Please rate this applicant on a scale of 1 - 5 in the following areas.

5 is the highest rating. \* = unable to comment

	*	1	2	3	4	5
1. Ability to use the English language orally						
2. Ability to use the English language in writing						
3. Academic performance						
4. Academic potential						
5. Appearance						
6. Attitude towards peers/co-workers						
7. Attitude towards study/work						
8. Attitude towards authority						
9. Reliability/ Dependability						
10. Adaptability/ Flexibility						
11. Maturity Level						
12. Ethics/ Value System						
13. Initiative/ Motivation/ Drive						
14. Responsibility/ Leadership Ability						

Please continue reference on 2<sup>nd</sup> page attached!

**CAYMAN ISLANDS  
MINISTRY OF TOURISM, ENVIRONMENT, INVESTMENT & COMMERCE  
SCHOLARSHIP AWARD  
SCHOLARSHIP APPLICATION FORM**

**REFERENCE II FOR SCHOLARSHIP APPLICATION Continued**

---

---

Please give your assessment of this applicant's likelihood for success in the programme for which they have applied:

---

---

---

---

---

---

Please comment on any other personal or general characteristics of this applicant.

---

---

---

---

---

I/We declare that the above particulars are correct to the best of our knowledge and belief, and I/we understand that false statements may lead to the refusal or withdrawal of the scholarship award.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this form **no later than FRIDAY, 1 MAY 2009** directly to:

Deputy Director – Product Development  
Department of Tourism,  
Regatta Business Park  
Leeward 2, West Bay Road  
PO Box 67  
Grand Cayman KY1 – 1102