



INSTRUCTIONS: PLEASE COMPLETE ALL SECTIONS OF THIS FORM

- Answer ALL sections IN BLOCK CAPITALS.
• One (1) passport size photograph should accompany this form.
• Attach all supporting documents (eg. Transcript, CXC/GCE passes etc.).
• A non-refundable processing fee of JA\$1000 or US\$10 should also accompany this application.

PLEASE NOTE

- Study option may be withdrawn in the event of under-enrollment in a given programme.
• Available study options to Diploma students are Day, Evening or Sunday.

PLEASE AFFIX YOUR PHOTO

JAMAICA (Select a location nearest you)

- KINGSTON, MANDEVILE, MAY PEN, MONTEGO BAY, OCHO RIOS, SAVANNA-LA-MAR

EASTERN CARIBBEAN (Select your location)

- ANTIGUA & BARBUDA, BARBADOS, DOMINICA, GRENADA, ST. VINCENT & THE GRENADINES, ST. LUCIA

SECTION A: Programme | Semester | Study Option

1 Programme for which you are applying
2 Preferred Study Option
3 State the term and the year you intend to commence your programme.

4. Have you previously attended IMS, IMP or UCC?
5. Are you currently enrolled with UCC?
6. Do you have access to high speed internet?

SECTION B: Personal Data

1 LAST NAME, FIRST NAME, MIDDLE NAME
2 DATE OF BIRTH
3 GENDER
4 MARITAL STATUS
5 NATIONALITY
6 EMAIL ADDRESS

7. Do you have any physical disabilities?

8 HOME NUMBER, MOBILE NUMBER, WORK NUMBER
9 MAILING ADDRESS
10 PERMANENT ADDRESS

11 PRESENT EMPLOYER, NUMBER OF YEARS IN PRESENT EMPLOYMENT, TOTAL YEARS OF EMPLOYMENT, CURRENT POSITION / JOB TITLE, TELEPHONE NUMBER, FAX NUMBER

SECTION C: Source of Funding

1 What is your source of funding?
2 If receiving sponsorship:
PLEASE AFFIX ORGANIZATION STAMP HERE

SECTION D: Education Background

SECONDARY SCHOOL / INSTITUTION ATTENDED	SUBJECT / PROGRAMME PURSUED	YEAR	AWARD	RESULT

TERTIARY INSTITUTION ATTENDED	COURSE / PROGRAMME PURSUED	YEAR	AWARD	RESULT

SECTION E: Student Ambassador Programme

1. Please indicate the person who referred you to UCC under the STUDENT AMBASSADOR PROGRAMME.

STUDENT'S NAME _____ PROGRAMME (IF KNOWN) _____ TELEPHONE _____

2. Where did you hear about UCC?

Newspaper Brochure Website Word of Mouth Other _____

SECTION F: Referee Information

List two references, one of whom should preferably be from your last school attended or curent employer.

1. NAME _____ ADDRESS _____ TELEPHONE NUMBER _____

2. NAME _____ ADDRESS _____ TELEPHONE NUMBER _____

Parent/Gaurdian Consent (If applicant is under 18 years old)

NAME OF APPLICANT _____

NAME OF PARENT/GUARDIAN _____

RELATIONSHIP _____

ADDRESS _____

TELEPHONE NUMBER _____

TELEPHONE NUMBER _____

DATE _____

DATE _____

SIGNATURE _____

SIGNATURE _____

SECTION G: Declaration

How does your intention to study for this programme fit into your career plans? How will it enhance the development of your organization?

1. My signature certifies that I have read, understood and agreed to the terms and conditions of this application, including UCC Conditions of Enrollment and Refund Policy and further agree to abide by the policies, rules and regulations of the institution.
2. I also understand that the Institution reserves the right to suspend or dismiss any student at anytime for disciplinary misconduct or when such action is deemed to be in the best interest of the student and student body.
3. I understand that withholding information requested or falsification of information given will result in disciplinary action and may make me ineligible for admission and enrollment.

APPLICANT'S SIGNATURE _____

DATE _____

FOR OFFICIAL USE ONLY

Number of Transfer Credits: _____ Institution from which credits are transferred: _____

Decision: Full Acceptance Denied

Provisional Acceptance Outstanding Requirements: _____

Remarks: _____

NAME OF ADMISSIONS COMMITTEE REPRESENTATIVE _____

SIGNATURE _____

DATE _____

NAME OF ADMISSIONS OFFICER _____

SIGNATURE _____

DATE _____

UCC RECRUITOR:

NAME _____

I.D. NUMBER _____