



EDMUND CHENEY SJ FOUNDATION



OVERVIEW

The EDMUND CHENEY SJ FOUNDATION is providing assistance to tertiary students who attended St. Mary's College and qualify for admission but are financially challenged to cover their tuition cost. Access to this programme provides the opportunity for students to participate in furthering their studies and giving back to the school, St. Mary's College and the community of Above Rocks. This is to promote student awareness and encourage community development.

Application Process

Applications are accepted between January 31st through to May 31st annually of the programme year. Application packages may be downloaded from the Edmund Cheney SJ Foundation website. The application form is designed to determine the applicants' suitability for entrance into the programme. Our primary goal is to provide financial need, consequently, the applicants must provide personal data, recent photo, employment details, student status details, household details, the nature of current financial assistance, household details, listing of household members and the particulars of two referees. The form must be signed by the applicant, witnessed and dated. If the applicant is under eighteen years old, the application must be co-signed by the parent or guardian.

Voluntary Service

All awardees must sign the contract to give 200 hours voluntary service annually for acceptance to the programme. Hours will be served at the school. This package contains all the relevant materials for students to initiate and complete voluntary service at STMC and other approved locations. The participant is required to sign, date and have witnessed the formal agreement regarding their involvement in the programme.



EDMUND CHENEY SJ FOUNDATION



APPLICATION FORM

Intended Academic Year of Entry: _____

Please read through this Application Form completely and carefully before completing it in

BLOCK CAPITALS, LEGIBLY and ACCURATELY. Use black or blue ink.

Your completed application must be emailed to;

Edmund Cheney SJ Foundation

P.O. Box 18, Kingston 3

Telephone: (876) 829-6988

Email: cheneyfoundation@gmail.com

Personal Information

Name: _____
LAST FIRST MIDDLE

Telephone: _____ Email: _____

Date of Birth: _____ TRN: _____ Gender: ☐ MALE ☐ FEMALE
YEAR MONTH DAY

Nationality: _____

Home Address: _____

Town/City/Parish: _____

Extracurricular Activities & Memberships

Hobbies/Games Played/Interests: _____

Name of Organization(s): _____ Position Held: _____



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APPLICATION FORM

Family Information

Mother's Name: _____ Email: _____

Mother's Occupation: _____

Father's Name: _____ Email: _____

Father's Occupation: _____

Where do you fall in the number of children in your family (eg. 1st, 5th): _____

Number of siblings (brothers & sisters): _____ No of Brothers: _____ No of Sisters: _____

Age of oldest sibling (brother or sister): _____ Age of youngest sibling (brother or sister): _____

Voluntary Service Commitment

Are you available for volunteer service?: _____ If you answer "no", please explain...

PLEASE TYPE/WRITE YOUR EXPLANATION HERE

Tertiary Education Decision

Institution: _____

Course of Study: _____ Faculty: _____



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APPLICATION FORM

Exam Results

Status*	Exam Body (CXC, GCE, SSC)	Subject	Grade	Year

Post-Graduation Activities

If you have graduated STMC, please indicate what you have been doing over the past year.

PLEASE TYPE/WRITE YOUR ANSWER HERE



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APPLICATION FORM

Personal, Academic and Professional Goals Statement

Write an essay providing information about yourself and why you want to pursue your chosen programme.

PLEASE TYPE/WRITE YOUR ANSWER HERE

Reference Information

Please provide the details of TWO references (ONE academic, ONE character) who may be contacted on your behalf. Appropriate persons must include current / past Principal/ Dean of Studies and/or Justices of the Peace, Minister of Religion, Registrar / Police etc.

FIRST REFERENCE

Name:	
Address:	
Relationship: (to applicant)	
Organisation:	
Position:	
Telephone No:	
Email Address:	

SECOIND REFERENCE

Name:	
Address:	
Relationship: (to applicant)	
Organisation:	
Position:	
Telephone No:	
Email Address:	



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STUDENT DECLARATION

I have read and understood this document and hereby agree that I will be disqualified from the programme, if it is found that information provided to ECSJF under this application, or by subsequent requests, is found to be false.

I also agree that and in so doing I would have forfeited all rights to payment and future opportunities for consideration under the programme.

I further declare that the information on this form is to the best of my knowledge true, correct and complete.

In signing this document I agree to:

1. *Participate in all mandatory activities, (Absence from these activities will disqualify a candidate from the award)*
2. *Use the money obtained for the intended purpose only.*
3. *Allow the TECSJF to verify the information provided in this application form.*



Attach a
passport-sized photo here

Name of applicant: _____

BLOCK CAPITALS

Signature of applicant: _____

Date: _____

Name of witness: _____

BLOCK CAPITALS

Signature of witness: _____

Date: _____

Name of Parent/Guardian:
(If applicant is under 13
years)

BLOCK CAPITALS

Signature of Parent/
Guardian: _____

Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Please read through this Application Form completely and carefully before completing it in

Write carefully, accurately and legibly in BLOCK CAPITALS; using black or blue ink.

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