



**Public Service Union of Belize  
Education Grant  
Application**

**PSU Member Information**

Applicant is:  Member  Dependent  
(Check appropriate box)

Full Name of Member: \_\_\_\_\_

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

\_\_\_\_\_

Phone # (Home/Cell): \_\_\_\_\_ Phone # (Work): \_\_\_\_\_

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

Membership Branch: \_\_\_\_\_

Employer: \_\_\_\_\_

If GoB, state Ministry/Department/Unit

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

**Education award for which you are applying:**

(Check appropriate box)

Secondary    \_\_\_ 1<sup>st</sup> Form    \_\_\_ 2<sup>nd</sup> Form    \_\_\_ 3<sup>rd</sup> Form    \_\_\_ 4<sup>th</sup> Form

Tertiary Award    \_\_\_ 1<sup>st</sup> year    \_\_\_ 2<sup>nd</sup> Year

**This section is to be completed if applicant is a dependent**

PSU Member's relationship to applicant  Father     Mother     Guardian  
(Check appropriate box)

Has the applicant previously received a P.S.U. Education Award?  Yes     No  
(Check appropriate box)

If yes, which year \_\_\_\_\_



B

**Applicant's Information**

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

Mr.  Mrs.  Miss  Ms. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Check appropriate box) DD/ MM/ YYYY

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

\_\_\_\_\_

Phone # (Home/Cell): \_\_\_\_\_ Phone # (Work): \_\_\_\_\_

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

Present Place of Study: \_\_\_\_\_

\_\_\_\_\_

Present Program of Study: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

If not already in school, institution you have been admitted to for the upcoming academic year:

\_\_\_\_\_

Proposed Program of Study: \_\_\_\_\_

Address of Institution: \_\_\_\_\_



C

**Educational Experience:**

Primary School (s) Secondary School(s), College(s), University(ies) or other institutions attended:

| Institution Name: | From: (date) | To: (date) |
|-------------------|--------------|------------|
|                   |              |            |
|                   |              |            |
|                   |              |            |
|                   |              |            |
|                   |              |            |

**Please note:**

- **A copy of current transcript/semester report or report card(s) and/or a current Letter of Acceptance is required.**
- **It is the responsibility of the applicant to ensure that all required documents are submitted by June 30, 2023.**

I, \_\_\_\_\_ certify that the information contained in this  
(Applicant Name)  
application is true and correct.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_