



HIGH SCHOOL ASSISTANCE PROGRAMME (HSAP) APPLICATION FORM - 2021

The Applicant should be within the existing high school system, up to 5th Form or who will be entering the secondary system for the first time in 2021 through their PEP achievement

ngn school Assistance Programm	the secondary system for the first t	ime in 2021 through their PEP achievemen	t	
STUDENT'S NAME:				
AGE:	DATE OF BIRTH:	SEX: Male	Female	
HOME ADDRESS: _				
TELEPHONE:		<u> </u>		
PRIMARY SCHOOL A	TTENDED:			
SECONDARY SCHOOL	OLTO BE ATTENDED/ATTENDING:			
NUMBER OF BROTH	ERS & SISTERS ATTENDING SCHO	OL:Basic Primary Sec	condary Tertiary	
MOTHER'S NAME: _				
HOME ADDRESS:				
RESIDENCE: Owned Rented Rent Free				
TELEPHONE: EMAIL:				
MOTHER'S OCCUPA	.TION:	EMPLOYED: Yes	No 🗌	
NAME OF EMPLOYER:HOW LONG EMPLOYED?				
C&WJ CREDIT UNION MEMBER? Yes No				
FATHER'S NAME:				
HOME ADDRESS: _				
RESIDENCE: Owne	ed Rented Re	ent Free		
TELEPHONE:	EI	MAIL:		
FATHER'S OCCUPAT	TION:	EMPLOYED: Yes	No 🗌	
NAME OF EMPLOYE	R:	HOW LONG EMPLOYED	?	
C&WJ CREDIT UNION MEMBER? Yes No				
OTHER APPLICATION	ON REQUIREMENTS:			
 Preliminary PEP Picture of the stu 	Scores or a copy of the school repordent	t for the just concluded school year.		
3. A brief summary	of the 3 top reasons why you should	be awarded this bursary (To be writ	ten by the Student)	
 Final date for Submission of completed Application Forms: No later than Friday, July 9, 2021. Application forms must reach the C&WJCCUL Head Office on Wednesday, July 14, 2021, by 3:30 pm. 				
FOR OFFICIAL USE				
NOTE: Branch Manager to sign confirming that at least one parent or guardian of applicant is a member of C&WJCCUL				
BRANCH:	RECEIVED BY:	DATE REC	EIVED:	

Signature _____

I hereby confirm that applicant's parent/guardian is a member of C&WJCCUL

COMMENTS _____

Name the three (3) top reasons why you should be awarded this bursary.			