## MINISTRY OF EDUCATION, YOUTH & INFORMATION JOHN J. MILLS SCHOLARSHIP 2018/2019

## **NOMINATION FORM**

Name of Teacher's College				
<u>GE</u>	NERAL INFORMATION			
1.	Nominees should have completed a Teachers' College Diploma.			
2.	Application form must be completed in duplicate.			
3.	Nominees should make their own application to U.W.I. for admission.			
4.	<ul> <li>4. Nomination forms should be accompanied by</li> <li>(i) Short statements written by the candidates regarding their interests and expected contribution to the Jamaican society.</li> </ul>			
	(ii) Certified copy of College Transcript.			
SE	CTION A (To be completed by applicant)			
1.	Name (Mr., Miss, Mrs.)			
2	Date and Place of Birth			
3	Nationality and Citizenship			
4	Present Address			
5	Telephone NoE-mail address			
6	6 Permanent Address (if different from (4)			
7.	EDUCATIONAL RECORD			
	STITUTION DATE AWARD currently at U.W.I, please indicate)			

## ACADEMIC QUALIFICATIONS - STATE DETAILS CLEARLY, WHERE APPLICABLE THESE SHOULD INCLUDE PROFESSIONAL CERTIFICATES AND DIPLOMAS OBTAINED.

DA	ГЕ	EXAMINATION	SUBJECTS	STATE LEVEL (ADVANCE OR ORDINARY)	RESULTS (DISTINCTION, CREDIT OR)
8		stinctions or awards			
9	Responsible position held during Educational Career				
10	Name of Present School and subject(s) taught				
11	Proposed Cou	rse of study			
12		nt Information			

Name	Position	
Name	Position	
Detach reference form and su	bmit to the referees named above.	
Signature		
Date		

## **SECTION B (To be completed by Principal of Teacher's College)** 1. Principal's comments 2. **CRITERIA GRADES** (5 point scale A-E) Leadership Humanities Sense of Discipline Participation in Cultural, Social and Sporting Activities Sense of Achievement of Excellence **Dedication and Commitment** Overall Grade Kindly submit application not later than March 26, 2018 to:-**The Tertiary Unit Ministry of Education 2 National Heroes Circle P.O. Box 38 Kingston 4** Tel: 922-1400-9

(1)	STATE THE SCHOLARSH	IP BEING APPLIED FOR							
		Scholarship							
		REFEREE REPORT							
		SECTION A							
		our name in the space below. To					forn	n.	
		is applying fo	or adn	nissi	on/s	chola	arshi	ip	
NA	ME IN FULL								
to	study	and requests that you	compl	ete 1	his o	evalu	atio	n.	
		SECTION B							
<u>T(</u>	) REFEREE								
I.	The referee report is confident in a sealed envelope with your	itial, please return the completed r signature across the flap.	l repo	rt to	the	appl	ican	t	
II. Your ranking of the applicant of the following characteristics will be one of severa criteria used in making a decision. Please use this rating scale.						ral			
	5 - outstanding 4 - above average 3 - average 2 - below average 1 - poor 0 - no basis for judgeme	ent							
1)	Ability to express himself/her	rself orally	5	4	3	2	1	0	
2)	Ability to express himself/her	•	5	4	3	2	1	0	
3)	Emotional Maturity	C .	5	4	3	2	1	0	
4)	Initiative		5	4	3	2	1	0	
5)	Intelligence		5	4	3	2	1	0	
<b>6</b> )	Potential for service in the ch	osen area	5	4	3	2	1	0	
7)	Seriousness for purpose		5	4	3	2	1	0	
Ho	ow long and in what capacity h	ave you known the applicant?							
SU	JMMARY EVALUATION:	Please summarise your person evaluation of this candidate. Scandidate's special strengths a	Sugge	st bo	th t	he			

MINISTRY OF EDUCATION

Name	••••••	•••••
Signature	••••••	
Occupation	• • • • • • • • • • • • • • • • • • • •	••••••
Qualification/Positi	on	••••••
Organization	•••••	
Telephone	•••••	••••••
NOTES:	1.	If desired, additional comments may be given on a separate sheet of paper, which should be attached to this form.
	2.	Please reply promptly as your failure to submit a report or late submission of your report will prevent a sound assessment of the candidate.