



CHECKLIST FOR APPLICATION FOR IB, CAPE, AP SCHOLARSHIPS

Documents checklist for upload

Application Period: 1 Mar – 30 April annually

Stage 1: Demographic Information

- Recent full face photo
- Birth certificate
- Proof of having the Right to be Caymanian. *If applicable, adoption papers are also required. (Caymanian Status letter, Acknowledgement Letter, or copy of Caymanian parent birth certificate)*
- Applicant's cover letter, to be addressed to
The Scholarship Secretariat, Ministry of Education, Youth, Sport, Agriculture and Lands, 2nd Fl., Government Administration Building, 133 Elgin Avenue, P.O. Box 108, Grand Cayman, KYI-9000, CAYMAN ISLANDS
- Completed, signed and dated Overseas Application Form, Declaration of Accuracy, Information release form and Declaration (pgs 3 – 5 of this document)

Stage 2: Personal Statement

- Personal Statement (*completed online*)

Stage 3: Academic Details

- Transcripts from high school (*as applicable*)
- Copies of all degrees or certificates achieved (*including external examinations*)

Stage 4: Institution and Programme Details

- Letter of acceptance or evidence of application from high school (provisional/unconditional).

Stage 5: Financial Details and Means Testing

- Employment letters from parent(s)/guardian(s) verifying salary
- Signed and dated Means Purpose and Supporting Information Statement by each parent/guardian *

* This blank form has to be downloaded from www.education.gov.ky/scholarships



MINISTRY OF
EDUCATION, YOUTH, SPORTS
AGRICULTURE & LANDS
CAYMAN ISLANDS GOVERNMENT

Government Administration Building Box 108
133 Elgin Avenue Grand Cayman KY1-9000
CAYMAN ISLANDS
t. (345) 244 2417 f. (345) 949 9343
www.education.gov.ky

ACADEMIC CRITERIA FOR FUNDING

Scholarship funding will be provided for those qualifying students who are going into their final year of studying AP, IB, and CAPE Programmes up to CI\$7,000 for the final year. However, students must be registered in the following:

ADVANCED PLACEMENT (IP):

- Registered in a minimum of two AP subjects which are in addition to a minimum of two AP subjects already completed in the first year of AP studies and other subjects as required by relevant school
- Have a minimum GPA of 3.25 with no D's & F's in first year of study of AP
- Have recommendation from relevant institution to continue with AP Studies

CAPE :

- Registered in three 2-Unit subjects
- Obtain a minimum grade of C/iii in 3 subjects in first year of CAPE

INTERNATIONAL BACCALAUREATE (IB):

- Registered in a minimum of one Higher Level (HL) Certificate and four Standard Level (SL) Certificates
- Have a minimum GPA of 3.25 with no D's & F's in first year of study of IB
- Have recommendation from relevant institution to continue with IB Studies

Please note that scholarship funding is not guaranteed, and the Education Council therefore reserves the following rights:

- to prioritise the award of scholarships by areas of study;
- to prioritise the award of scholarships by degree;
- to prioritise the award of scholarships based on the availability of funds as determined by Cabinet.

CONTACT DETAILS FOR THE SCHOLARSHIP SECRETARIAT:

Email: scholarships@gov.ky

Tel: 244-2482



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**LOCAL APPLICATION FOR:
ADVANCED PLACEMENT (AP)
CAPE STUDIES
INTERNATIONAL BACCALAUREATE (IB)**

Name of Applicant: _____
(last/family) (first) (middle)

Date of Birth: _____ Marital Status: _____
(dd/mm/yyyy)

Local Mailing Address: _____ Local Postal Code: _____

Local Physical Address: _____

Email Address: _____

Local Telephone: _____ Alternate Telephone: _____

DECLARATION OF ACCURACY

To be eligible for a scholarship/funds from the Education Council of the Cayman Islands Government (“the Government”), you must agree to the following statements and sign to indicate your approval:

I hereby make an application for a scholarship/funds from the Government, to assist with my post-secondary or tertiary education.

I declare that, to the best of my knowledge, the information provided on this application is true, correct and complete. The Cayman Islands Government has my permission to verify any information provided and contact any credit reporting agency as deemed necessary.

I fully understand that it is unlawful to knowingly make any false statement or representation on this application and that any such false statement or misrepresentation will result in the said scholarship being rescinded, whereupon I will become liable to the Cayman Islands Government for the full amount of the funds disbursed to me.

I understand my request for a scholarship/funds will not be reviewed and may be voided unless my application form is complete, accompanied by the required documentation and submitted within the specified timeframe through the online application programme featured on the Scholarship Website at www.education.gov.ky/scholarships.

Signature of Applicant

Date



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Information Release Form

Cayman Islands Government Scholarship Holders

I, _____ of P.O. Box _____
(name of student)

am currently on a scholarship from the Cayman Islands Government to attend the

(Name of School)

and do hereby give permission for the Ministry of Education/Education Council of the Cayman Islands to

contact my school and obtain any relevant academic, attendance and citizenship information pertaining

to me.

NAME: _____

SIGNATURE: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____



Post Secondary Student Declaration

I, _____ of P.O. Box _____
(Name of Student)

am applying for a scholarship from the Cayman Islands Government to attend the AP / CAPE / IB
(delete as appropriate)

Programme at _____. I understand that

should I decide to study elsewhere, on completion of this programme, this decision may limit my ability

to obtain subsequent scholarship funding. I have discussed this with my parents/guardians.

NAME: _____

SIGNATURE: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

I understand that should _____ fail to complete this programme
(Name of Student)

I _____ will be responsible for the repayment of all funds awarded to date.
(Name of Parent/Guardian)

STUDENT SIGNATURE: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____