



A-PATH Grant Application Form

The below information is for the sole purpose of the A-PATH Grant Program. All applications collected for this grant program will be emailed to mpahitd@gov.ky. By signing and submitting this document, applicants are giving permission to the Ministry of PAHITD to share their information with the members of the A-PATH Selection Committee to decide on who will be the recipients of the A-PATH Grant.

Personal Information

Full Name _____

Email Address _____

Telephone Number _____

Home Address _____

Educational Background

1. Highest level of education completed:

2. Name of Institution

3. Name of Institution Currently Enrolled in



4. Expected Year of Graduation

Grant Interest

Please select your area of interest for the scholarship from the options provided by ticking the preferred one:

- 1. Planning and Infrastructure _____
- 2. Agriculture _____
- 3. Transport _____
- 4. Housing _____

Please specify the program of study you intend to pursue on the A-PATH Grant Program:

Eligibility Requirements

Please answer the questions below by ticking the appropriate answer.

- 1. Are you between 18 and 44 years old?
Yes _____ No _____
- 2. Do you possess proof that you are a citizen of the Cayman Islands?
Yes _____ No _____
- 3. Do you have proof of your academic achievements that qualify you for the A-PATH Grant Program?
Yes _____ No _____
- 4. Will you be available to attend an interview?
Yes _____ No _____
- 5. If selected, are you able to secure a character reference in writing for yourself?
Yes _____ No _____



References

If you are selected, you will be required to provide the name and contact information (email address and phone number) of any ONE individual who can serve as a reference for your application.

Important Documents

All shortlisted applicants will be required to provide proof of all documentation necessary to prove eligibility.

Declaration

I solemnly declare that the information provided in this application is true and accurate to the best of my knowledge. I understand that any misrepresentation or omission may result in disqualification from the A-PATH Grant Program.

Signature

Date:
