



SUMMER OF SERVICE COMPETITION - 2017

A Project of the I Believe Initiative

The Governor-General's Programme for Excellence

2017 Theme: *"Inspiring & Energizing Communities to Serve"*

Website: www.ggpe.org.jm Email: ibi@ggpe.gov.jm

SOS REGISTRATION FORM

PLEASE COMPLETE AND RETURN THIS FORM BY **FRIDAY, MAY 5, 2017**

A: REGISTRANT'S INFORMATION

LAST NAME:		FIRST NAME:		MIDDLE NAME:	<input type="radio"/> MALE <input type="radio"/> FEMALE
DATE OF BIRTH: MM / DD / YYYY	AGE:	TRN:		UNIVERSITY ID#:	
HOME PHONE:	MOBILE:		EMAIL:		
HOME ADDRESS (Apartment & Street #):					
DISTRICT / TOWN:			PARISH:		

B: CONTACT INFORMATION FOR PARENT / GUARDIAN

LAST NAME:		FIRST NAME:		<input type="radio"/> MOTHER <input type="radio"/> FATHER <input type="radio"/> GUARDIAN
WORK PHONE:	MOBILE:		EMAIL:	
HOME ADDRESS (Apartment & Street #):				
DISTRICT / TOWN:			PARISH:	

C: SCHOOL FOR UNDERGRADUATE STUDY

NAME OF UNIVERSITY TO WHICH YOU ARE MATRICULATING OR HAVE MATRICULATED:	
CAMPUS ADDRESS:	
DISCIPLINE / COURSE FOR WHICH YOU HAVE BEEN ACCEPTED:	
WHY HAVE YOU CHOSEN THIS AREA OF STUDY?	
SCHOOL ACCEPTANCE STATUS: <input type="radio"/> Full <input type="radio"/> Provisional	DURATION OF COURSE:

D: SERVICE PROJECT DETAILS

IMPLEMENTING ORGANISATION:		
SUPERVISOR'S NAME:		SUPERVISOR'S POSITION / TITLE:
SUPERVISOR'S LANDLINE #:	MOBILE #:	EMAIL:
SOS PROJECT NAME:		PARISH:
STREET ADDRESS:		TOWN/DISTRICT:

PROJECT DESCRIPTION:
Please provide details about your proposed service project. What do you intend to do? Why this organization and/or project?



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E: ACADEMIC PERFORMANCE

HIGH SCHOOL(S) / COLLEGE(S) WHERE YOU COMPLETED THE CARIBBEAN ADVANCED PROFICIENCY EXAMINATIONS (CAPE) / ASSOCIATE DEGREE:

1.

2.

Subject: 1.

Grade/GPA:

Year:

2.

3.

4.

5.

F: OTHER INFORMATION

HAVE YOU EVER OFFERED VOLUNTARY SERVICE FOR A WORTHY CAUSE? Yes No (If yes, indicate below where & for what cause)

HOW DID YOU LEARN ABOUT THE SUMMER OF SERVICE COMPETITION? Television Radio Print Media GGPE Website Other

(If other, state):

Kindly note that if a project is not approved we will make an effort (where possible) to place a competitor with a volunteer organization. The I Believe Initiative is unable to assist with money, refreshments or transportation to or from your Project during the competition.

G: REGISTRANT'S DECLARATION

I am a Jamaican national pursuing my **first** undergraduate course of study which is being done / will be done on a full-time basis. (I have not transferred from another undergraduate degree programme.) My course of study is accredited by the University Council of Jamaica (UCJ) and the institution at which I am currently / will be enrolled is duly registered with the said Council.

I am currently unemployed and am in need of financial assistance to complete this course. I have not previously benefitted from a scholarship to pursue my studies. Neither am I indebted to the Students' Loan Bureau (SLB) for any sums received. Should the opportunity of a scholarship arise leading up to the start of, during or following the competition, I will immediately advise the *National Coordinator, Governor-General's Programme for Excellence* at (876) 927-6424 or 5 and via email at ibi@ggpe.org.jm.

I declare that the information provided here is true. I understand that misrepresentation or failure to disclose required information will result in disqualification and a withdrawal of any prize that may have been awarded by the end of the competition:

Registrant's Signature: _____

Date: _____

Witnessed by: _____
(Justice of the Peace)

Date: _____

JP's STAMP

FOR INTERNAL USE:

Documents received from the Registrant:

- Completed SOS Registration Form
- Passport sized Photograph of Registrant
- Character Reference Letter

- Copy of University's Acceptance Letter
- Transcript(s) (showing up to the most recent courses completed)
- Other: _____