## APPLICATION FOR PAYMENT OF ECONOMIC COST

Name:	Tel No:
Date of Birth:	
Mailing Address:	
Nationality:	
Present Occupation:	
Course of Study:	No. of Years:
Faculty:	
Campus Territory:	
(Please check appropriately)	
Have you been granted study leave?	Yes No. of years:
	No
	Pending
UWI acceptance:	Yes
	No
Date:	
Signature —	

Please return form with a copy of your Birth Certificate or Passport and copies of your University Acceptance Letter