



NEVIS ISLAND ADMINISTRATION

MINISTRY OF HUMAN RESOURCES

NEVISIAN OVERSEAS STUDENT REQUEST FOR COVID-19 FINANCIAL AID

Please complete the following questionnaire. Kindly fill all sections or your request will not be processed. The completed form should be returned to hrdept@niagov.com

Full Name: _____

Last Address in Nevis: _____

Current Overseas Address: _____

Telephone: _____

Email: _____

Name of College/University (Please attach proof of enrolment):

Undergraduate, Graduate, or Post-Graduate Studies: _____

Field of Study: _____

Expected date of graduation: _____

Name of Bank/Financial Institution: _____

Account Number: _____

Are you a US Citizen/Green Card Holder? _____

(If no, please attach copy of student visa to application)

Do you have a support system while in the USA? Yes No

Please indicate area(s) of need: Groceries Rent Other _____

Kindly indicate how the COVID-19 Pandemic has impacted you financially:

Please provide proof of loss of income/employment (if applicable):

Kindly indicate the type of scholarship or financial assistance you have been awarded in order to complete your studies:

If previously employed, please indicate employer and contact number:

Emergency contact: Name: _____ Relation: _____ Tel# _____