



CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

Port of Spain: Donovan Palmer Building, 68-72 Maraval Road, New Town. Tel: 628-8129 Fax: 622-4434

San Fernando: 10 Farah Street. Tel: 652-1486 Fax: 652-3643

Tobago: 9Mc Kay Hill Scarborough 901028 Tel: 639-4720 Fax: 635-0862

71 Ojoe Road, Sangre Grande 450240. Tel: 691-5035 Fax: 691-3776

E-mail: info@teacherstt.com Website: <http://www.teacherstt.com>

TEACHERS 2026 Caribbean Secondary Education Certification CSEC Awards TEACHERS 2026 Caribbean Advanced Proficiency Examination (CAPE) Awards

RULE/INSTRUCTIONS (PLEASE READ BEFORE COMPLETING APPLICATION FORM)

TEACHERS Credit Union offers **ten (10)** awards on the **Caribbean Secondary Education Certification**, and **ten (10)** based on the **Caribbean Advanced Proficiency Examination Year 1& 2**.

A. Eligibility of Applicant

1. Applicants **MUST** be members of TEACHERS Credit Union in good standing, that is, he/she must neither be delinquent nor inactive and must have been a member **for at least two years**.
2. **The applicant must be the father or mother of the child or be the legal adopted parent or the legal guardian of the child. Proof of relationship must be submitted with the application.**

CSEC:

3. Members whose children wrote the 2026 Examination and were awarded a certificate with **seven (7) or more passes (ones)**.

CAPE:

4. Award based on level 1 and level 2 performance i.e. 2025 & 2026

B. Confidentiality of Information

5. All information given in application will be held in the **STRICTEST CONFIDENCE**.

C. Completion of Application form

6. All questions on the application form **MUST** be answered. Where a question is not applicable, indicate this by N/A.
7. Application **MUST** be certified and signed by the member.
8. Application **MUST** be submitted accompanied by the pertinent documents, i.e. *copy of Birth Certificate, CSEC, CAPE results. (Results slips to be stamped and dated by relevant school)*

IMPORTANT NOTICE: ALL information supplied must be true and correct. If any of the information provided is proved at any time to be incorrect, then the application will not be considered for the granting of the Award. If proof of such incorrectness is found after the granting of the Award, the Award is likely to be withdrawn.

D. Submission of Applications

9. Applications may be submitted in sealed envelopes clearly marked.

Teachers 2026 (CSEC/CAPE) Awards

The Board of Directors

Teachers Credit Union

68-72 Maraval Road, Newtown, Port of Spain.

OR emailed to: - awards@teacherstt.com

Deadline for Submission of application forms –

04th September 2026

**LATE APPLICATIONS WILL NOT BE ENTERTAINED
UNSUITABLE APPLICANTS WILL NOT BE CONTACTED**



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PLEASE REVIEW RULES/INSTRUCTIONS BEFORE COMPLETING APPLICATION FORM.

1. Member

Member's Name: _____

Member's Relation to Child (please tick appropriately)
(Mother/Father to include Legal Adopted Parentage)

Mother ☐ Father ☐ Legal Guardian ☐

HomeAddress: _____

Home Telephone No.: _____ Work Telephone No.: _____ Cellular No.: _____

Ministry/Department: _____

WorkLocation: _____

WorkAddress: _____

Email Address: _____

AccountNo.: _____

Identification No: (Please insert appropriately)

Passport: _____ Driving Permit: _____ I.D. Card: _____

2. Child

Name: _____

Address: _____

School: _____

Date of Birth: _____

CSEC No.: _____

3. Documentation:

Each application must be accompanied by the relevant documentation.

(N.B. please indicate documents enclosed with a tick)

- ☐ Copy of Birth Certificate
☐ Copy of Birth Certificate and Affidavit (where necessary)
☐ Copy of Birth Certificate and Adoption Order (where necessary)
☐ Copy of Documents showing proof of Guardianship (where necessary) ☐ Copy of Examination Results (Stamped and dated by relevant school)

CAPE YEAR 1 No.: _____

CAPE YEAR 2 No.: _____

4. Certification

I hereby certify that the information contained in this Application Form is true and correct. I understand that if any information given in this application is found to be incorrect, this disqualifies me from being considered for the granting of an Award. Further, if the information is found to be incorrect after this granting of the Award, the Award is likely to be withdrawn.

Member's Signature: _____ Date:.....