

SCHOLARSHIP APPLICATION FORM

■ Financial information

Are you currently working?

If you are, please state the company name and your monthly gross salary (please submit official confirmation):

Are you part of an extended family (4 children and more)? Yes ☐ No ☐

State the names and the age of your siblings:

How many of your siblings are in employment or are married?

State the total number of people that are dependent on your parents' income:

What is the father's job and annual income?

(please submit a copy of the income tax declaration from the previous year)

What is the mother's job and annual income?

(please submit a copy of the income tax declaration from the previous year)

Do you own your house? Yes ☐ No ☐

If No, do you pay house rent? Yes ☐ No ☐

If yes, what is the amount payable (please submit a copy of the rental agreement)?

State other reasons for which you believe you should be granted a scholarship:

■ Terms and conditions

- a) Applications for scholarship will only be accepted if all the necessary documentation is submitted.
- b) Applications for scholarship must be completed before the programme start date.
Late applications will not be accepted.
- c) The duration of the scholarship applies for the full programme.
- d) This scholarship cannot be combined with another UNICAF scholarship.

■ Declaration

Please enter your name below to confirm that the information provided in this form is true, complete and accurate and no information has been omitted, that you agree to abide by the Unicaf University Terms and Conditions and you understand that Unicaf University has the right to cancel your application or future registration should it be revealed at any time that any of the information on this form is untrue or incomplete.

Name:

Signature:

Date:

■ For internal use

The application is approved

☐

Yes

☐

No

Scholarship percentage:

Comments:

Director's Name:

Signature:

Date:

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