

SECTION A: PERSONAL DETAILS

Student ID Number:	Campus:	Year/ Semester:
Title:	Full Name:	
<i>(As it appears on your Birth Certificate)</i>		
Date of Birth: DD / MM / YYYY	Citizenship:	
<i>(certified copy of birth certificate must be attached)</i>		
Sex : <input type="checkbox"/> Female <input type="checkbox"/> Male	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	Number of Children: <input style="width:50px;" type="text"/>
Postal Address: <i>Please provide a postal address for correspondence.</i>	Residential Address:	
Telephone:	Email :	

SECTION B: APPLICANT'S BANK DETAILS *(For Allowance purpose)*

Account Name: _____ Account Number: _____ Bank: _____

SECTION C: FINANCIAL DETAILS OF SPOUSE *(If married then please complete this section)*

Full Name of Spouse:		Gender : <input type="checkbox"/> Female <input type="checkbox"/> Male
Date of Birth: DD / MM / YYYY	Age:	Citizenship:
Postal Address:	Residential Address:	
Telephone:	Email:	
Name of Employer <i>(if Employed)</i> :		Certified to be True by Employer: <i>Signature and Official Stamp of Employer required in this section</i>
Occupation :		
Telephone:	Your Gross Annual Income \$	

SECTION D: FINANCIAL DETAILS OF PARENTS/ GUARDIAN

FATHER's Details

Father's Full Name:

Date of Birth: DD / MM / YYYY

Place of Birth : Age:

Postal Address:

Telephone:

Email:

Employment Details:

Name of Employer (if Employed) :

Occupation :

Telephone: Annual Gross Income \$

Certified to be True by Employer:

Signature and Official Stamp of Employer
required in this section

MOTHER's Details

Mother's Full Name:

Date of Birth: DD / MM / YYYY

Place of Birth : Age:

Postal Address:

Telephone:

Email:

Employment Details:

Name of Employer (if Employed) :

Occupation :

Telephone: Annual Gross Income \$

Certified to be True by Employer:

Signature and Official Stamp of Employer
required in this section

GUARDIAN's Details

Guardian's Full Name:

Date of Birth: DD / MM / YYYY

Place of Birth : Age:

Postal Address:

Telephone:

Email:

Guardian's Employment Details:

Name of Employer (if Employed) :

Occupation :

Telephone: Annual Gross Income \$

Certified to be True by Employer:

Signature and Official Stamp of Employer
required in this section

SECTION E: DECLARATION

I, the applicant, do solemnly and sincerely declare that the information provided in this application is complete and accurate to the best of my knowledge. **There are penalties for deliberately Submitting false or misleading information.**

Applicant's signature

DD / MM / YYYY

Date

(Please check if you have accurately filled this form. Incomplete forms will not be assessed)

SHRIKISUN BALGOVIND SCHOLARSHIP APPLICATION CHECKLIST

Please check these requirements before handing over this application for processing.

- Completed all sections in the Shrikisun Balgovind Scholarship Application form.
- TIN Letter of Applicant, and or Parent(s)/ Guardian(s) if supporting applicant. Spouse's TIN Letter if married.
- Evidence of family income (*latest Salary Slip*).
- If not working or of self-employed, please provide a valid Statutory Declaration as proof of family income.

(Statutory Declaration is a written statement that allows a person to declare something to be true. When making a statutory declaration, you are declaring that the statement in it is true. If you intentionally make a false statement in a declaration, you will be charged with an offence. Statutory declaration can be attained from a Lawyer or a Justice of Peace.)

- Applicant's Bank Account details.

FOR OFFICIAL USE

1. Vetting

1.1 **Application vetted:** Complete Incomplete HOLD

Comments:

1.2 **Registration:** New resuming Student Continuing Student Registered Non-registered

1.3 **Applicant's GPA** **Grades for previous semester:** _____

Vetted by: _____ Date: _____ DD / MM / YYYY

2. Financial Details

Applicant's Income : \$

Spouse's Income : \$

Father's Income : \$

Mother's Income : \$

Guardian's Income : \$

Total Gross Annual Income:

\$

(A Sum of Section C and D)

3. **Decision:** Recommend Do Not Approved

Notes by Authorised officer:

Recommending officer: _____ Date: _____ DD / MM / YYYY

WHERE TO SEND YOUR COMPLETED APPLICATION

Shrikisun Balgovind Scholarship

Via Email: scholarships@usp.ac.fj