

TEMBUSU COLLEGE
APPLICATION FOR TEMBUSU COLLEGE GRANT

Important Information and Instructions

Please read the following instructions carefully before filling up and submitting your application:

- 1) This application form is for Tembusu College students who are applying for the Tembusu College Grant in AY2011/12 Semester 2.
- 2) All applications are subjected to review by the Tembusu College administration, and provision of the grant will be needs-based and means-tested.
- 3) Applicants are to fill in all sections of the form for complete application. If any section of the application form does not apply to you, insert "N/A". Incomplete sections will result in application being void. False/inaccurate information submitted, or omission of required information will also render the application invalid.
- 4) This application form must be accompanied with photocopies of the following documents:
 - (I) Income tax statement or pay slips of immediate family members; and
 - (II) Supporting documents for scholarships or any other existing financial aid (if applicable).
- 5) All applications and supporting documents should reach Tembusu College by **20 Feb 2012 (Mon), 12pm**. Late and/or incomplete applications will not be processed.
- 6) Alternatively, applicants can mail their completed application forms and supporting documents to:

Tembusu College
University Town, NUS
28 College Avenue East, #B1-01
Singapore 138598

- 7) Applicants sending their applications by snail mail are reminded to take into account postal working hours, and that the application must reach Tembusu College by the stipulated deadline to be deemed valid.
- 8) All information / documents submitted to Tembusu College will be treated with the strictest confidence.
- 9) Applicants who are receiving bursaries/scholarships/free aids are to declare them in their application. It is the onus of the applicant to obtain prior approval from their existing awarding bodies (if any) before applying for the Tembusu College Grant.

TEMBUSU COLLEGE

MEANS-TESTED APPLICATION FOR TEMBUSU COLLEGE GRANT

For Official Use Only

Application Reference: _____

APPROVED / REJECTED / KIV

Remarks: _____

(A) PARTICULARS OF APPLICANT (STUDENT)

Name		Matric No.	(For matriculated students only)
		NRIC No.	
Citizenship	Date of Birth	Sex	
Marital Status	Age	Home Faculty: Year of Study:	
Home Tel No.:			
Mobile Tel No.:			
Email address:			
Home Address:			
Type of Housing: Status:	Others, please specify:		

SCHOLARSHIP / BURSARY / FINANCIAL AID DETAILS

Note: Applicants who are currently receiving bursaries/scholarships/free aids should obtain prior approval from their existing awarding bodies (if any) before applying for the Tembusu College Grant.

Are you a Scholarship Holder? (If yes, please furnish details below.)

Name of Scholarship	Date Received (MM/YYYY)	Duration (in Months)	Value of Award Per Year (e.g. Tuition fee+ \$2,000 allowance)

Are you receiving any financial aid? (If yes, please furnish details below.)

Source of Financial Assistance	Date Received (MM/YYYY)	Duration (in Months)	Value of Aid (in SGD)

(B) PARTICULARS OF FAMILY MEMBERS (REFER TO ANNEX A)

(C) DECLARATION

I declare that the information provided by me in this application is true and correct to the best of my knowledge and belief, and I furnish the information knowing that I may be liable to prosecution if I have stated any information, which I know to be false, or do not believe to be true. I will inform Tembusu of any subsequent changes in the information applied in this application, such as the change of address, monthly income, etc.

Signature of Applicant:

Name:

Date:

(B) PARTICULARS OF FAMILY MEMBERS

Name of Family Member in the Household	Staying with applicant?	Relationship With Applicant	Identification No. Eg. Passport, NRIC.	Age	Occupation	Monthly Gross Income (\$)¹ (please attach supporting documents)	For Official Use Only
	Yes/No						Type of Member²
For Official Use Only	TOTAL³					\$ _____	_____
	INCOME PER CAPITA					\$ _____	Headcount

¹ Refers to gross monthly income of applicant and immediate family member(s), before deduction of CPF, rental income etc. This includes all sources of income, including rental, interest. Documents for verification – income tax statement, pay slip, for those without pay slip or income tax statement, and other supporting documents where applicable.

² I – Immediate family member N – Family member not eligible for computation in headcount.

³ Total headcount and monthly gross income should exclude family members not eligible for computation in headcount.

FOR OFFICIAL USE ONLY

RECOMMENDATION BY		
<p>I have checked that the means test has been applied appropriately based on the Guidelines on Means Testing Framework. I recommend that approval be granted for the above applicant to receive a subsidy rate stated above with effect from</p>		
<p>Recommendation: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
_____ Signature	_____ Name & Designation	_____ Date

VERIFIED BY		
<p><input type="checkbox"/> Supported <input type="checkbox"/> Not Supported</p>		
<p>Reasons: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
_____ Signature	_____ Name & Designation	_____ Date

APPROVAL BY MASTER		
<p><input type="checkbox"/> Approved <input type="checkbox"/> Not Approved</p>		
<p>Reasons: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
_____ Signature	_____ Name & Designation	_____ Date