**Application to Singapore University of Technology and Design (SUTD)**

**Research Mentorship Programme**

***Please note that only typed entries will be accepted. Handwritten forms will not be processed.***

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| PERSONAL INFORMATION | | |
| Full Name  (as in NRIC/Passport) | : |  |
| NRIC/FIN | : |  |
| Gender | : | Male / Female |
| Date of NS Enlistment  (if any) | : | DD – MM – YYYY |
| Estimated Year of University Admissions | : | YYYY |
| Date of Birth | : | DD – MM – YYYY |
| Marital Status | : |  |
| Race | : | Chinese / Malay / Indian / Others |
| Country of Birth | : |  |
| Citizenship Type | : | Singaporean / Singapore PR / Others: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CONTACT INFORMATION | | |
| Block/House No. | : |  |
| Unit Number | : |  |
| Street Name | : |  |
| Zip/Postal Code | : |  |
| Country | : |  |
| Mobile Phone Number | : |  |
| Residential Number | : |  |
| Email Address | : |  |
| ACADEMIC INFORMATION | | |
| Qualification | : |  |
| Name of School | : |  |
| Year of Study in 2020 | : |  |
| Stream | : |  |

\*Please fill out your O Level / Year 4 or equivalent results below.

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| Name of School where Qualification was Obtained | : |  |
| Name of Qualification | : |  |

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| **S/N** | **Subjects** | **Grade** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
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| 7 |  |  |
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| INTRODUCTION | | | |
| Please provide us with a brief introduction about yourself and share with us why you are interested to participate in SUTD’s Research Mentorship Programme. (Limit to 200 words) | | | |
|  | | | |
| Please share more on unique skillsets that you possess and number of years of related experience (e.g. programming languages, robotics, etc.) | | | |
| Skillsets | | | Number of Years of Experience |
|  | | |  |
| Please indicate your preferred research project (top 3 choices). | | | |
|  | | | |
| Share any other interesting information about yourself that will help us to know more about you. You may submit a link to your YouTube, blog or other social network to us. | | | |
| URL | : |  | |

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| OTHER INFORMATION | | |
| Please circle your answers for the following questions: | | |
| 1. I am interested in applying to SUTD, upon graduation from my current school | : | Yes / No |
| 1. Solely for survey purposes, please indicate your preferred pillar (degree programme) of interest. | : | ASD / EPD /  ESD / ISTD |
| 1. I am considering other local/ overseas universities.   If yes, some examples are:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | : | Yes / No |
| 1. Have you been awarded any scholarship(s)?   If yes, the name of Scholarship(s) is/are  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | : | Yes / No |
| 1. Are you suffering from any disability, impairment or medical condition (e.g. mobility, hearing, vision, physical limitation) which may cause you to require special assistance during your project at SUTD?   If yes, please provide details in order to enable SUTD to understand your needs and the services that you may require.   |  | | --- | |  | | : | Yes / No |

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| APPLICATION DECLARATION |
| 1. I consent to the University’s collection, use and disclosure of my personal data for the purposes of evaluating and processing my application and administering the Research Mentorship Programme. I understand that as part of the application process, the University will be considering my academic results and other relevant records and hereby consent to the University obtaining such information or seeking verification from any third party (both in and outside Singapore) which the University deems necessary to make with reference to my records, conduct or other details relevant to this application. 2. I declare that the particulars and information given in this application are true to the best of my knowledge and belief, and I have not willfully suppressed any material facts. 3. I agree to abide by the decision of the University concerning this application and that the University’s decision is final. The University is not obliged to provide any reasons for its decision concerning this application. 4. I consent to the University’s collection, use and disclosure of my personal data to send me updates on University-related activities from time to time, through the following mode(s) of communication:  * [ ] e-mail * [ ] SMS/MMS (text messages) * [ ] Voice calls * [ ] postal mail   \*tick as appropriate   |  |  |  | | --- | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Signature |  | Date | |