

Financial Services Authority Scholarship Application Form

Passport Photo

Details of Applicant		
1. Surname:		
2. First Name(s):		
3. Date of Birth (dd/mm/yyyy):		
4. Nationality: 5. Gender: M \square F \square		
6. N.I.N:		
7. Marital Status: Single \square Married \square Divorced \square 8. Number of Children:		
9. Address:		
10. Telephone Number:		
Details of Course		
12. Course being applied for:		
a)		
b)		
13. Level of the course: Bachelor's Master's Postgraduate Diploma		
14. Name of University:		
15. Country:		
16. Course Duration:		

17. Start Date:	17. Start Date:			
18. Have you applied or been accepted by the University to undertake the course?				
Fd	ucational R	ecord		
19. Please state your highest academic qualification(s) and attach copies of certificates and transcripts				
Name of Institution	Year	Course	Score	
Em	ployment R	ecord		
20. Name of Organisation:				
21. Post title:				
22. Contact details of employer:				
23. Summary of main responsibilities:				
_				
En	nergency Co	ntact		
Provide details of person to be contacted in c	ase of emer	gency:		
24. Full name:				
25. Relationship to applicant (e.g. father/mother/spouse/other specify):				
26. Address:				
27. Telephone Number:				

References

28. Please provide the contact details of your two referees:	
Full name:	
Post title:	
Name of Organisation:	
Address:	
Telephone Number:	
Full name:	
Post title:	
Name of Organisation:	
Address:	
Telephone Number:	
Personal Statement	
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Declaration of Applicant

I declare that the information I have provided on this application form is true and accurate to the best of my knowledge.

If this application leads to the successful award of a scholarship, I agree to be bound by all the terms and conditions governing the Financial Services Authority (FSA) sponsored scholarships. I understand that any breach of these terms and conditions may result in the termination of my scholarship and I may become liable to reimburse all or part of the cost of my training, as determined by the FSA.

If my training is to be undertaken overseas, I agree to return to Seychelles upon completion or termination of my training.

Signature of Applicant	Date of Signature

Documents to submit with your application:

- Passport photo
- Copy of National Identity Card
- Updated Curriculum Vitae
- Academic transcripts
- Two letters of recommendation
- Endorsement letter from employer (if employed)