FOR UNIVERSITY USE ONLY					



## **CANADIAN UNIVERSITY DUBAI**

APPLICATION FOR SPORTS SCHOLARSHIP

Family Name	First Name	Middle Name	
Academic Year	 Term	 Date	



## APPLICATION FOR SPORTS SCHOLARSHIP

New Stu	dent	Returning Student
General Data	StartingTerm and Academi	c Year/
First Name:	Father's Name:	Last Name:
Nationality:	Male/Female:	
Date and Place of Birth:		
Contact Number(s):		
Email Address:		
GPA:		
Sport:		
Please attach reference from	n your head coach	
Date of Admission:		
If you are already enrolled a	at CUD, indicate:	
Program:		Concentration:
ID#:		Year of Enrollment:
Signature of Candidate:		
Signature of Registrar (after	confirmation of data in accor	dance to Student file):



		FOR OFFICIAL USE ONLY
First Name	Middle	 Last
 ID Number		
Scholarship Accepted		Scholarship Refused
Comments:		
		······································
The Director of Admissions		Chair of Scholarship Committee
CEO & Vice Chancellor		