

FINANCIAL ASSISTANCE APPLICATION FORM

1. Did the applicant enjoy any form of scholarship or financial support in school?

Yes No

If yes, please specify grant and total amount of grant received _____

2. Who finances the applicant's schooling?

Parents Self

Scholarship, please state name and total amount of scholarship _____

Educational Plan, name of company and plan, and total amount of plan _____

Others, e.g. relatives, etc.; please state estimated amount of financial support per semester _____

3. Does the applicant have a passport?

Yes No

If yes, please provide the passport number _____

4. Has the applicant travelled outside the country in the last 5 years?

Yes No

If yes, who financed the trip (check applicable item below)

Parents Relatives

Siblings Others, please specify _____

5. Does any of the applicant's brothers/sisters/stepbrothers/stepsisters contribute to the family's expenses?

Yes No

Frequency of contribution?

Once a month Twice a month 3-4 Times a month

Once in 2 months Once in 3 months Others _____

How much is the average contribution? _____

Who makes the contributions? _____

6. Does the applicant have any relatives (whether here or abroad) who contribute in meeting the family expenses?

Yes No If yes, how much? _____

7. What are the sources of income of the family/household? (please tick all applicable items)?

Salaries or wages Commissions Farms/hacienda/fishponds
 Retirement Pension Business Remittances from abroad
 Real estate rentals Dividends/interests/earnings from investments
 Practice of Profession e.g. Lawyer Others _____

8. Does the applicant's family have/own a business/home industry?

What kind? _____ No. of employees _____ Capital Invested _____

When was the business started? _____ Amount Net Profit per year _____

Financial Need Information

In order for the Selection Committee to understand your financial need, write about yourself and your family explaining why you need financial assistance. You must be honest and complete.

I hereby certify that all information written in this application is complete and accurate.

I understand that misrepresentation of information or withholding of information requested in this form will be considered for disapproval or cancellation of financial assistance.

Date of application _____

Applicant's Signature over printed name

Applicant's Parent/Guardian's Signature over printed name