

APPLICATION FOR CO-OPERATIVE SCHOLARSHIP 2010



INSTRUCTIONS

1. Please write legibly in BLOCK LETTERS. Complete all sections and indicate 'NA' for items not applicable.
2. This application must be accompanied by a certified true copy of your birth, NRIC, educational certificates, CCA records and testimonials. The original should not be forwarded but must be produced later.
3. All attachments to your application must bear your name. Documents submitted in support of the application are not returnable.
4. False particulars or wilful suppression of material facts will render you liable to disqualification.
5. SNCF will not enter into correspondence with regard to reasons for non-selection of applicant.
6. * Please delete where not applicable.

Please affix
a recent
passport size
photograph

1. PROPOSED COURSE OF STUDY & UNIVERSITY

(A) Course of Study / University Applied	
(B) Course of Study / University Applied	

2. PERSONAL PARTICULARS

Salutation	* Mr / Miss / Ms / Mrs / Mdm
Name as in NRIC / Passport <i>(Underline surname, include aliases)</i>	
Name in Chinese Characters <i>(If applicable)</i>	
Date of Birth (DD/MM/YYYY)	
Country of Birth	* Singapore / Malaysia / Others, please specify:
* NRIC (Pink / Blue) / Passport No.	
Citizenship	* Singaporean / Permanent Resident
Date Obtained PR (DD/MM/YYYY) <i>(If any)</i>	
Previous Citizenship <i>(If any)</i>	
Marital Status	
Race	
Religion	
Residential Address	
Postal Address <i>(If different from Residential Address)</i>	
Contact No.	(Home) (Office) (Mobile)
Email Address	

(D) Achievements / Awards / Prizes

Name of Award / Commendation	Name of Awarding Organisation	Year of Award

4. EMPLOYMENT HISTORY

Please include your industrial / professional attachment(s).

Position Held	Name of Employer	Duration		Basic Monthly Salary (Last Drawn)
		From (MM/YYYY)	To (MM/YYYY)	

5. NATIONAL SERVICE RECORDS (for male applicant only)

Please submit a copy of your SAF Certificate of Service with your application.

NS Status	* Full-Time / Part-Time / Exempted / Completed / Yet-to- Serve / Not Applicable <i>If exempted, state reason(s):</i>		
Date Enlisted (DD/MM/YYYY)		Date Discharged (DD/ MM/YYYY)	
ORD (DD/MM/YYYY)		Rank at ORD	
Present Appointment		Vocation	
Name of Camp		Camp Telephone No.	

6. GENERAL**(A) Language Proficiency**

Please indicate Good, Fair or Poor.

Language	Spoken	Written

(B) Hobbies & Interests

Hobby / Interest	Level of Proficiency <i>(If applicable, e.g. Piano Grade V)</i>

(C) Affiliation / Membership

Name of Club / Co-operative / Society	Describe Your Participation	From (MM/YYYY)	To (MM/YYYY)

7. OTHER SCHOLARSHIPS / GRANTS APPLIED FOR

Have you applied or are applying for any other scholarship / grant? *If yes, please give details.*

* Yes / No

Name of * Scholarship / Grant (1)		Course	
Name of Sponsor Organisation		Outcome of Application	
Name of * Scholarship / Grant (2)		Course	
Name of Sponsor Organisation		Outcome of Application	
Name of * Scholarship / Grant (3)		Course	
Name of Sponsor Organisation		Outcome of Application	

8. FAMILY PARTICULARS

Please provide the particulars of all immediate family members, i.e. parents and siblings. If you are married, please provide information about your spouse and child / children.

Name (1) <i>(as in NRIC / Passport)</i>			
Relationship		Age	
Citizenship		Marital Status	
Occupation <i>(If applicable)</i>		Current Monthly Salary	
Name of * Employer / School		Affiliated to any Co-operative? <i>(If any, please specify.)</i>	* Yes / No

Name (2) <i>(as in NRIC / Passport)</i>			
Relationship		Age	
Citizenship		Marital Status	
Occupation <i>(If applicable)</i>		Current Monthly Salary	
Name of * Employer / School		Affiliated to any Co-operative? <i>(If any, please specify.)</i>	* Yes / No
Name (3) <i>(as in NRIC / Passport)</i>			
Relationship		Age	
Citizenship		Marital Status	
Occupation <i>(If applicable)</i>		Current Monthly Salary	
Name of * Employer / School		Affiliated to any Co-operative? <i>(If any, please specify.)</i>	* Yes / No
Name (4) <i>(as in NRIC / Passport)</i>			
Relationship		Age	
Citizenship		Marital Status	
Occupation <i>(If applicable)</i>		Current Monthly Salary	
Name of * Employer / School		Affiliated to any Co-operative? <i>(If any, please specify.)</i>	* Yes / No

9. CHARACTER REFEREES

Name of Referee (1)			
Name of Employer		Occupation	
Relationship		Years Known	
Contact No.		Email Address	
Name of Referee (2)			
Name of Employer		Occupation	
Relationship		Years Known	
Contact No.		Email Address	

10. OTHER INFORMATION

1. Have you ever suffered or are you suffering from medical condition, illness, disease, mental illness or physical impairment? * Yes / No
2. (a) Do you have a criminal record in Singapore? * Yes / No
(b) Have you ever been convicted in a court of law in any country (excluding parking offences or criminal records disclosed above)? * Yes / No
3. Have you been charged with any offence in a court of law in Singapore or in any country for which the outcome is pending (excluding parking offences)? * Yes / No
4. Are you aware of being under any current police investigations in Singapore or in any other country following allegations made against you? * Yes / No
5. Have you been or are you under any financial embarrassment, i.e. (a) an undischarged bankrupt; (b) a judgement debtor; (c) have unsecured debts and liabilities of more than 3 months of last drawn pay; (d) have signed a promissory note or an acknowledgement of indebtedness? * Yes / No
6. Have you ever broken any bond (e.g. bonds associated with scholarship or training awards)? * Yes / No
7. If your answer to any of the above questions is "Yes", please give details.

11. FEEDBACK

How did you learn about the Co-operative Scholarship? *(Please tick (✓) accordingly.)*

- | | |
|--|---|
| <input type="checkbox"/> BrightSparks | <input type="checkbox"/> Referral |
| <input type="checkbox"/> E-mailer | <input type="checkbox"/> Website (www.sncf.org.sg/coopscholarship) |
| <input type="checkbox"/> Facebook fan page
("Scholar with a Heart" – Co-op Scholarship) | <input type="checkbox"/> Others |
| <input type="checkbox"/> Postcard | |

12. CONSENT & DECLARATION

- (A) I give my consent for the relevant authorities to obtain and verify information from or with any source, as you deem appropriate for the assessment of my application for scholarship.
- (B) I declare that the information given in this application form and any sheets attached is correct and accurate and I have not wilfully suppressed / distorted any material facts.
- (C) I understand that submission of false particulars or wilful suppression of material facts will disqualify me or terminate the scholarship if I am so offered.
- (D) I understand that the shortlisting is based on merit and the personal information required in this form is used for administrative purposes only.

Signature of Applicant _____ Date _____