

FAITHACTS BURSARY AWARDS 2022 APPLICATION FORM



Please send application form to:

The Chairperson
FaithActs Bursary Awards Committee
FaithActs
Block 50 Commonwealth Drive #01-506
Singapore 142050

For official use only:	
Date Received:	2021
Application No.:	BA /2022

Deadline: By 27 August 2021

INSTRUCTIONS / IMPORTANT INFORMATION

1. Please read the enclosed **Important Information** carefully before you fill up this form.
2. Please enclose photocopies of **ALL** the following supporting documents:
 - a) Applicant's birth certificate / NRIC (both sides)
 - b) Applicant's latest academic results slip (mid-year 2021 and year-end 2020)
 - c) Parent's / Guardian's NRIC (both sides)
 - d) Latest CPF statements or pay slips or income tax returns or employment letters of parent(s) / guardian and other working family members
 - e) Self declared letter of income from housewives, odd-job workers and the unemployed
 - f) Parent's divorce, separation certificate or death certificate, if any
 - g) Medical report of applicant or any family member who has a chronic or serious medical condition
3. Application that is submitted after the deadline, incomplete or without all the supporting documents will not be processed. **Only one award is given per family.**
4. Successful applicants will be notified by **1st week of November 2021**. In addition,
 - a) the successful applicant **must attend** the presentation ceremony to receive the award in person; details will be sent in the notification letter.
 - b) The successful applicant **must produce** a medical certificate or letter of excuse duly signed by his/her parent if he/she is unable to attend the presentation ceremony; the FaithActs Bursary Awards Committee reserves the right to withdraw the approval.
5. Approved award will be issued in the form of a crossed cheque in the name of the successful applicant. Please ensure that the cheque is credited to the correct bank account.

EDUCATIONAL LEVEL <i>(Please tick)</i>		
<input type="checkbox"/> Special Education	<input type="checkbox"/> Secondary / Institute of Education (ITE)	<input type="checkbox"/> Junior College (JC) / Polytechnic
<input type="checkbox"/> Primary		

A) APPLICANT'S PARTICULARS		
Name (as in BC / NRIC)		Recent Passport Size Photograph
Address		
Colour of NRIC <input type="checkbox"/> Pink <input type="checkbox"/> Blue	Mobile No. Home no. Email Address	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
BC / NRIC No.	Nationality	Date of Birth / Age
Religion	Educational Level / Stream in 2021	Race
Are you a member of Youth Hub in FaithActs? <input type="checkbox"/> Yes <input type="checkbox"/> No (you must be a member to apply)		Any siblings applying for the same Bursary Awards? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a volunteer with FaithActs? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, indicate the programme(s) _____

B) PARTICULARS OF FAMILY MEMBERS					
Name	Relationship	NRIC No.	Date of Birth	Occupation	Gross Monthly Income

C) INFORMATION ON HOUSING <i>(Please tick)</i>	
HDB Flat	<input type="checkbox"/> 1-room <input type="checkbox"/> 2-room <input type="checkbox"/> 3-room <input type="checkbox"/> 4-room <input type="checkbox"/> 5-room <input type="checkbox"/> Executive Apartment
Private Property	<input type="checkbox"/> Condominium <input type="checkbox"/> Landed property
Ownership of Residence	<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Others (please specify): _____

D) OTHER SOURCES OF INCOME
<p>If your family has other sources of income, please tick the appropriate box(es) and indicate the amount that is received <u>every month</u>.</p> <p><input type="checkbox"/> No other source of income</p> <p> <input type="checkbox"/> Fixed Deposit / Unit trust / Investments: <input type="checkbox"/> Rental income: \$ _____ \$ _____ </p> <p> <input type="checkbox"/> Wife / Child maintenance: <input type="checkbox"/> CPF retirement withdrawal: \$ _____ \$ _____ </p> <p> <input type="checkbox"/> Others (Please specify income source and amount received): _____ </p>

E) FINANCIAL ASSISTANCE			
Are you receiving any of the following in the past 6 months?			
Name / Type <i>(Please tick)</i>	Name of Organisation / Contact Person	Date / Period	Amount
<input type="checkbox"/> Bursary			
<input type="checkbox"/> Scholarship			
<input type="checkbox"/> School Pocket Money Fund			
<input type="checkbox"/> MOE Financial Assistance Scheme			
<input type="checkbox"/> Others, please specify: _____			
<input type="checkbox"/> Others, please specify: _____			
<input type="checkbox"/> Others, please specify: _____			

Is your family receiving any financial assistance from other organisation or person (e.g. social welfare agencies, religious organisations, hospitals, relatives not living in the same household)?

Name / Type	Name of Organisation / Contact Person	Date / Period	Amount

F) REASON(S) FOR APPLICATION

How will the bursary money be used?

G) PARENT'S / GUARDIAN'S DECLARATION

I, _____ (*Parent / Guardian), NRIC No _____,
of _____, BC / NRIC No. _____
declare:

- 1) I understand that any false information given by me on this application will be sufficient for disqualification of the application. The wilful suppression of any material fact will be similarly penalised.
- 2) I understand that all information provided will be used to assess my ward / child's eligibility for bursary assistance.
- 3) I am aware that the bursary assistance provided by FaithActs is given for the benefit of my child / ward, and for the purpose of purchasing school related items (e.g. school shoes, schoolbooks) and paying the school fees (where needed)
- 4) I am aware that FaithActs has the right to recover in full the bursary amount that was given to me, if I have provided inaccurate information, or withheld any relevant information from FaithActs.

Signature of Applicant Signature of *Parent / Guardian Date

H) INFORMATION ON SCHOOL

Name of School _____

I) ACADEMIC RESULTS *(Please tick)*

Please submit photocopies of the latest mid-term or year-end results.

Total Marks	Marks in Percentage
Results	<input type="checkbox"/> Passed <input type="checkbox"/> Failed
Conduct	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent

J) SCHOOL RECOMMENDATION <i>(To be filled in by Principal / Vice Principal / Director / Dean / Head of Department / Teacher)</i>	
Name of School Official: *Dr / Mr / Mrs / Ms / Miss / Mdm	
Designation	
Tel No.	Fax No.
Comments by Principal / Vice Principal / Director / Dean / Head of Department / Teacher	
I *recommend / do not recommend *his / her application	
_____	_____
Signature and Date	School Stamp

K) FOR OFFICIAL USE BY FAITHACTS STAFF	
Date Received	/ /2021
Application No.	BA /2022
Results of Application	*Approved / Not Approved
Name of Bursary Applicant and NRIC/BC number	
Amount Approved	S\$
Category of Bursary	<input type="checkbox"/> Special Education <input type="checkbox"/> Primary <input type="checkbox"/> Secondary / ITE <input type="checkbox"/> JC / Polytechnic
Date Bursary is Disbursed	
Remarks (Official/Committee member)	
<hr/> <div style="display: flex; justify-content: space-between;"> Name / Designation Signature / Date </div>	

SELF DECLARATION LETTER

Name of parent/guardian: _____

I/C No.: _____

Please ✓ in the correct box.

I declare that I am **employed** as _____
(occupation) at _____ (Name of Company).
My gross income is \$ _____ per month.

I declare that I have been **self-employed** for ____ years as a _____,
under the business name of _____.
My average gross income per month is \$ _____.
Nature of my business

I declare that I am **unemployed** and I do not have any income of any kind.
(Reason(s) for unemployment)

Other declaration:

Declared by:

Signature

Date

* Please delete accordingly.