



**SERI STAMFORD
COLLEGE**

SCHOLARSHIP CONTINUOUS SCHEME APPLICATION FORM

1. PERSONAL PARTICULARS

Name			
Student ID No.		NRIC No.	
Programme		Year of Study	
H/P No.		Email	

2. SCHOLARSHIP APPLICATION DETAILS

Year of Application		Intake	
Scholarship Application (Please ✓ if applicable) <input type="checkbox"/> Scholarship Continuous Scheme (Entitle - <input type="checkbox"/> 100% / <input type="checkbox"/> 75% / <input type="checkbox"/> 50% / <input type="checkbox"/> 30% / <input type="checkbox"/> 20% / <input type="checkbox"/> 15%) Tuition Fees Waiver RM_____			

3. ACADEMIC PERFORMANCE (REQUIRED TO ATTACH ACADEMIC TRANSCRIPTS)

Academic Year Results (First year of study)
CGPA:

4. CO-CURRICULAR ACTIVITIES (USE EXTRA SHEETS IF NECESSARY)

Activity	Position Held	Period
1.		
2.		
3.		

5. ACHIEVEMENTS & AWARDS

Date	Particulars

I declare that all the information given above and the attachments are true and correct, and I agree the College has the right to reserve any decision regarding the award of a scholarship/loan.

Signature of Applicant: _____ Date: _____

For Office Use Only

Date Received: _____

RESULT	Signatures of Scholarship & Studies Grant Committee
<p>Approved</p> <p><input type="checkbox"/> Seri Stamford College's Scholarship Continuous Scheme (Entitle _____%)</p> <p><input type="checkbox"/> Not Approved</p> <p>Remarks:</p>	<p>_____(Name)</p> <p>_____(Name)</p> <p>_____(Name)</p> <p>Date:</p>