

CONFIDENTIAL

	APPLICATION FOR SCHOLARSHIP / FINANCIAL AID	
(V) the correct box.	The present application is submitted for:	
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Scholarship:	Financial Aid:	

# A. PERSONAL DATE: CANDIDATE: 🗌 STUDENT:

1.	First Name (As in Identification Card)	Last Name			
2.	Telephone Number	Email			
3.	Programme Of Study:				
4.	Civil Identification Card Number	Student Idení	ification Card No		
5.	Family Status: Single	Married	Divorced	Widowed 🗌	

B. FOR OFFICIAL USE ONLY- FINACIAL AIDS DEPARTMENT		
Date Received:///	Officer's Name:	
The application is approved:	Amount of Scholarship / Financial Aid :	
Notes:		
Date of Approval:		
Committee Members Signatures:		

#### C. ATTACHED DOCUMENTS/ CERTIFICATES / CONFIRMATION LETTERS (originals may be asked for verification purposes)

Important: Prior to submitting your application, please ensure that you have attached all copies of necessary certificates/ confirmation letters mentioned. Place ✓ where needed.

Attached documents/copies must be directly related to your reason of application (i.e for Excellence Scholarships you must attach you School Leaving Certificate, members of a multimember family must attach a copy of the multimember ID card, orphan students must attach their parents' death certificate, etc).

Attached Documents	
Proof of annual income from employer	
School leaving Certificate (Lyceum)	
Multimember ID card	
Unemployment Card	
Other Certificates (specify)	
	Proof of annual income from employer   School leaving Certificate (Lyceum)   Multimember ID card   Unemployment Card

# **D. FINANCIAL STATUS**

1. An	nnual gross income of applicant and/or family:
(ple	ease attach relevant tax return certificates)
me	easons to support your claim for scholarship / financial aid: (i.e school leaving certificate, orphan, ember of a multimember family, same family member also studying at NUP, health problems, nemployed etc.

## **E. PERSONAL DECLARATION**

## **APPLICANT'S DECLARATION:**

- All above mentioned information are true and accurate. I declare that I have enlisted all required information. Any disclosure or misinformation may lead to cancellation of the present application. I adhere to the University's right to ask for further personal certificates during the evaluation procedure of present application.

- I will inform the Course Office in writhing of any changes with regards family and/or financial status as well as the Programme and/or duration of my studies due to my understanding of these changes may alter the approval or not of the present application.

- I am responsible for supplying the relevant certificates.

- I authorize the Committee responsible for reviewing this application, preserving in electronic or any other form personal data keep in digital or printed form personal data within the meaning of the Processing of Personal Data (Protection of Individuals) Law, which have been declared in the present application.

Name: .....

Date of Application Submission ....../ ....../ ......./

Signature:....

# **EXCELLENCE SCHOLARSHIPS**

Neapolis University offers to undergraduate students scholarships valid for one academic year. Excellence scholarships are offered automatically based on the School Leaving Grade as follows:

#### School Leaving Grade

19,00 and above

Percentage of Scholarship

20%

After completion of the first academic year of studies these scholarships can continue until final completion of studies, provided that the students succeed a general grade of 85% and above. The amount of discount is accumulated on the approved fees.

#### FINANCIAL AID

Neapolis University offers financial aid under the form of discount to a limited number of **undergraduates** and **postgraduate** students who:

- Face serious economic difficulties
- Come from multimember families
- Have at least one more member of the same family also studying at NUP
- Have excelled in sports either pancyprian, national or worldwide

F. NOTES

All applications are submitted to Financial Aids and Scholarships Department of Neapolis University (Office 104), or sent by post at the following address: Danais Avenue 2, Pafos 8042, Cyprusç. Applications can also be sent by fax – Fax no: +357 26843535 or by email – Email address: andrea.louvari@nup.ac.cy Website: <u>www.nup.ac.cy.</u> For more information please contact Tel.: +357 26843315 Application Deadline for the Academic Year 2016-17: New students for Fall Semester / Current Students: 21<sup>st</sup> of October 2016 New students for Spring Semester: 3<sup>rd</sup> of March 2017 Any application received after this date is considered late.