

FINANCIAL AID APPLICATION FORM FOR THE ACADEMIC YEAR 2020-2021

A. PERSONAL DETAILS: STUDENT:

Name Surname
 (As indicated on Identity Card)
 Telephone Number Email
 Programme of Study
 Identity Card Number Student Identity Card Number.....
 Family Status: Single Married Divorced Widowed

B. FOR OFFICIAL USE BY THE MEMBERS OF THE COMMITTEE

Notes:

.....

Date of Approval:

Members Signatures:

Members Name:

**C. LIST OF ATTACHED CERTIFICATES/ OFFICIAL DOCUMENTS
 (Originals must be presented when requested for review)**

Important: Before submitting or sending your application, make sure you have attached all copies of certificates listed therein. Note ✓ where applicable.

The copies you have attached must be directly related to your request

Attached Copies		✓
1.	Tax Declaration/Confirmation from employer	
2.	Card for families with many children	
3.	Unemployment Card	
4.	Other Certificates/ Official Documents	

D. FINANCIAL CONDITION

Reasons that support your request for financial aid:

.....

E. DECLARATION OF APPLICANT

Declaration of Applicant:

Data Protection:

1. I, the undersigned, hereby provide my consent to the processing of my personal information, which I have disclosed herein to Neapolis University Pafos (hereinafter the "University"), by the University (i) for the purpose of the aforesaid application form and (ii) for any communications in relation to the aforesaid application form. (Hereinafter collectively referred to as the "Purpose").
2. I hereby acknowledge that, within the context of the performance of the Purpose, I may be required to provide personal information either to the University (including, but not limited to, my medical history) which are classified as 'sensitive' for the purposes of European data protection law and for which there are additional restrictions on how organisation(s) may use and hold this information. The University hereby confirms that it will always communicate to you the purposes for which the University wishes to use your sensitive information when it is being collected, and, if necessary, obtain your further consent at that time. We note that you are allowed to withdraw your consent at any time by communicating with the University via any of the available communication methods.
3. For the avoidance of any doubt, the following apply:-
 - i. Any information and data provided herein by the undersigned to the University and which will be used, either directly or indirectly, by the University for the performance of the Purpose (as the case may be), shall at all times be identified, clearly marked and recorded by the University as the personal data of the undersigned.
 - ii. All personal data acquired from the undersigned pursuant to this form shall be solely used by the University for the performance of the Purpose (as the case may be) and shall not be further processed or disclosed to any third party without the consent of the undersigned unless this is required and/or allowed pursuant to the provisions of the Regulation (EU) 2016/679 on the Protection of Personal Data and/or the provisions of the applicable local legislation in relation to the protection of personal data (as amended from time to time) and/or the provisions of any other applicable legislation.
 - iii. The undersigned has been notified of his/her rights in relation his/her data contained herein. The aforesaid rights are outlined analytically in the Privacy Notice of the University, a copy of which is available at www.nup.ac.cy
 - iv. For the avoidance of any doubt the undersigned hereby confirms that the undersigned is fully aware of his/her rights in relation to his/her data contained herein.

Signature:

Declaration of Applicant:

- The information provided above is complete and accurate. I hereby declare that I have recorded on this form all the information that has been requested. Any omission or inaccuracy will result in the cancellation of the application. In addition, it is to my knowledge that the University reserves the right to request any personal certificates during the process of evaluation of this application.
- I will inform in writing any changes regarding my family and financial condition as well as the type and length of my study, as I understand that these changes will likely determine the approval, or not, of my application.
- I undertake to provide all the relevant supporting documents.
- I authorize the Committee that will be set up to examine my application to hold in electronic or any other form, personal data within the meaning of the Processing of Personal Data (Protection of Individuals) Law, as herein stated.
- As a recipient of financial support, I have an obligation to participate in the University's common activities and events, e.g. participation in parades, representations of the University, educational exhibitions, etc.

Signature: Date of Submission of Applications/...../.....

Name/ Surname:

NOTE

Applications will be received by the Financial Services/ Revenue Department (Tel. 26843383/3315/3356/3334) in the following ways:

- Forms handed in to Office 122/121 of the University
- Electronically to the address accounts_receivables@nup.ac.cy
- By post to the address Danaes 2 Avenue, 8042 Paphos, Cyprus (In Consideration of the Revenue Department)

Deadlines for receipt of applications:

- a. For the Fall semester until 15th November 2020
- b. For the Spring semester until 15th March 2021

Applications that are submitted after the deadlines will be considered overdue and may not be evaluated.