



Admissions and Registration Office

SCHOLARSHIP APPLICATION FORM

REG/SCAF/007

Section A – Student I	nformation (Ple	ase print)			
Date of Application			Student ID#		
Student Full Name					
Nationality			Gender	□ Male	\square Female
Email Address			Contact Number		
Student Type	☐ New Student	☐ Returning Student	☐ Existing Student m	noving to a nev	w programme
Application for	☐ Fall Semester	\square Spring Semester	☐ Part-time		
Are you in receipt of any other EAU discount?	□Yes □No		If 'Yes' Discount Type and Amount		
Programme Name					
Programme Start Date					
Section B - Explanati	on / Special Cir	cumstances			
Use this space to indicate any special circumstances you would like to be considered:					
Section C - Required	Documents				
Supporting Documents	 A copy of 	following documents: of the last attained acado equivalent	emic award certificate/	transcript	
Section D - Authoriza	ation				
	I declare that the information on this form is true, correct and complete. The University has my permission to verify the information reported by obtaining documentation as needed.				
Declaration	I acknowledge that, if I am studying an undergraduate programme, I must sustain a minimum CGPA of 3.5 or its equivalent to maintain my entitlement for the scholarship throughout my study at EAU. I acknowledge that, if I am studying a PhD programme, there are limited partial scholarships available on the first year of study only.				
	Scholarships / Incentives / Fee Reductions / Packages cannot be combined or exchanged with any other incentive programme or scholarship.				
Student / Guardian Signature					
Section E – For Offici	al Use ONLY				
Scholarship Amount	☐ Approved	%	□ Rejected		
Remarks					
Admissions / Registration Office			Date		
Dean of Faculty			Date		
Vice-Chancellor			Date		