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**LEMBAGA BIASISWA KENANGAN MAULUD**

**RESEARCH GRANT**

**Application Form**

**PART 1: Applicant and Project Details**

|  |  |
| --- | --- |
| Type of Application *(please tick)*  | Individual *– proceed to 1(B)* |
| Organisation – *proceed to 1(C)* |
| Group – *proceed to 1(D)* |

|  |  |
| --- | --- |
| Focus Area *(please tick)* | Education |
| Socio-politics |
| Economics |
| Culture |

**PART 1(B): For Individual Applicants ONLY**

|  |  |
| --- | --- |
| Mr / Ms / Mrs / Mdm \* | Male / Female \* |
| Name of Individual (as in NRIC) |
| NRIC | Date of Birth |
| Residential Address Postal Code |
| Contact No (Mobile) | Email Address |
| Occupation |
| Place of Employment |
| Employment Address |

\*Please circle where applicable

**PART 1(C): For Organisations ONLY**

|  |
| --- |
| Name of Organisation |
| Registration/UEN Number |
| Website Address |
| Registered Address Postal Code |
| **Contact Person**  |
| Name of Person in-charge  |
| Designation  |
| Tel No |
| Email |

**PART 1(D): For Groups ONLY**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please state the names and relevant details of all members

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Contact Number | Email Address |
| Leader |  |  |  |
| Members |  |  |  |
| Members |  |  |  |
| Members |  |  |  |
| Members |  |  |  |

  |

**PART 2: Details of Research/Publication**

|  |
| --- |
| Title of Research / Publication |
| Brief Overview of the project and the expected outcomes |
| Impact of Research / Publication on the Malay/Muslim Community and the wider public in Singapore |
| **Timeline**I) Proposed Start DateII) Proposed End Date |
| **Budget**Estimated Cost of Project |
| **Funding from other sources** **From Received Confirmed Pending**1. ……………………………………………. $ ……….. $ …………. $ ……….. 2. …………………………………………… $ ……….. $ …………. $ ……….. 3. ……………………………………………. $ ……….. $ …………. $ ………..  |

**UNDERTAKING**

I undertake to acknowledge that the research was supported by LBKM and notify LBKM if the research is presented or published elsewhere.

Upon completion of the research, I will submit one hard copy of the research documents/publication as well as submit a 200-500 word summary of key findings and present these findings to LBKM.

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 Signature Date

***Note: For Groups and Organisations, the person signing is deemed to be the authorized signatory***

**Please email the application to** **enquiries@lbkm.org.sg** **or mail to;**

LBKM

No 448 Changi Road #04-01

Wisma Indah

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