|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **LBKM Scholarships**  Affix Passport Photo Here | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **APPLICATION FORM** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *\*please tick* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | Prestigious Scholarship (Undergraduate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | |  | | Prestigious Scholarship (Postgraduate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | Iconic Scholarship – Field of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | Future Economy Scholarship | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| Application Checklist | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. Please type / write clearly and neatly within the spaces provided. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. All columns and spaces must be filled. If it is not applicable to you, indicate “NA”. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. Please tick the checklist below and ensure all required documents have been provided, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *to be arranged in the following order:* | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □   Recent passport size photograph | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □   Photocopy of NRIC or passport (if NRIC is unavailable) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| □   Letter of acceptance / enrolment from the university / matriculation card | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □   Latest exam results / supervisor report (for non-first year students) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □   Copies of all certificates obtained | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □   Transcript of exam results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □  Referee reports | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □   Mission statement | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □ Research proposal | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| □ Publication(s): Please submit a copy of each of your publication(s), if any. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □   For **self-financing applicants**: to explain how you intend to finance your studies. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please include documentary evidence, such as a bank statement, recent payslip, letter of sponsorship, grant or award. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. All documents which are not in English must be accompanied by an official certified English translation. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. Only shortlisted applicants will be interviewed. The selection panel’s decision is final. LBKM does not enter into correspondences with regard to the reasons for non-selection of applicants. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| Please send your application (hard copy) to: | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | | **Executive Officer (Scholarship & Bursary)** | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | | **Lembaga Biasiswa Kenangan Maulud** | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | | **No 448 Changi Road #04-01 Wisma Indah** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | **Singapore 419975** | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |  | | | |
| 1. Incomplete applications and documents will not be accepted. Documents submitted are not returnable. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| All applications must reach LBKM by: **11 Sept** **2017** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For Official Use: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date received: | | | | | | | | | | |  |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Course/University: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section A:** | | | **PERSONAL PARTICULARS** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Name (as in NRIC): | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | |  | | | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| NRIC No: | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Nationality: | | | | | |  | | | | | | | Singaporean | | | | |  | Gender: | | | | | | | |  | | | | Male | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | Singapore PR | | | | |  |  | | | | | | | |  | | | | Female | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Date of Birth: | | | | | |  | | | | | | | | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Marital Status: | | | | | |  | | | | | | | Single | | | | |  |  | | | | | | | | Married | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | Widowed | | | | |  |  | | | | | | | | Divorced | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Race: | | | | | |  | | | | | | | | | | | |  | Religion: | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Home Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | Postal code: | | | | | | | | | | | |  | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Mailing address, if different from above: | | | | | | | | | | | | | | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | Postal Code: | | | | | | | | | | | |  | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Personal Email: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| Contact: | | | | | | Mobile: | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | Home: | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| **Section B:** | | | **FAMILY DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | (Please fill in details of the family members in your household. Please add more lines if necessary.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | |  | | | | |  |  | | | | | | | |  | | | | | | | | | | | | | | |
| **Name** | | | | | | | | | | | | | | **Relationship** | | | | **Occupation** | | | | | | | | | | | | | **Employer / Institution** | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section C:** | | | | **CURRENT / INTENDED COURSE OF STUDY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| University: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Course of Study: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mode of Study: | | | | | | | | Full time ONLY | | | | | | | | | |  | | | Coursework | | | | | | | | | | | | |  | | | Research | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Year of Study: | | | | | | | | 1 | | | | | 2 | | | 3 | 4 | | *\*please circle* | | | | | | | | | | | Others: | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Commencement Date: | | | | | | | |  | | | | | | | | | | | | | Expected Graduation Date: | | | | | | | | | | | | | |  | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Why do you choose this university and course? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have a confirmation letter to pursue this course? *(if yes, please attach)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | |  | | | | | No | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amount of tuition fees and other related costs to complete the course: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SGD$ | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Section D:** | | | | **ACADEMIC QUALIFICATIONS** *(attach certified true copies of* ***official*** *transcript of academic records from each university/institution/school)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |
| a. Tertiary Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
| **From**  **(Year)** | | | **To**  **(Year)** | | | | | | | **Institution** | | | | | | | | | | | | | | **Qualification** | | | | | | | | | | | | | **Results** | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
| b.    Secondary & Post-Secondary Education | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
| **From**  **(Year)** | | | **To**  **(Year)** | | | | | | | **School / College/ Polytechnic** | | | | | | | | | | | | | | **Qualification** | | | | | | | | | | | | | **Results** | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
|  | | |  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | |
| **Section E:** | | | | **INVOLVEMENT IN COMMUNITY OR CO-CURRICULAR ACTIVITIES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | |
| **Year (Period)** | | | | | | | | | | | **Name of Association/Organisation/Society** | | | | | | | | | | | | | | | | | **Nature of Involvement** | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | |  | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | |
| **Section F:** | | | | **EMPLOYMENT HISTORY** *(in chronological order, current first)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | |
| **Year (Period)** | | | | | | | | | **Position** | | | | | | | | | | | | | | | | | **Employer** | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | |  | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section G:** | | | | **REFEREES (***Please provide details of 2 referees who are not family members, and attach their reports***)** | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | | | |  | | | | | | |  | | | | | | | | | |
| 1) | Name: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Address: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Contact No: | | | | |  | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Years Known: | | | | |  | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Email: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Occupation / Employer: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
| 2) | Name: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Address: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Contact No: | | | | |  | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Years Known: | | | | |  | | | | | | | | | |  | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Email: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
|  | Occupation / Employer: | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | |  | | | | | | |  | | | | | | | | | | |
| **Section H:** | | | | **ADDITIONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | |  | | | | | | | |  | | | | | | | | | |  | |
| 1. Are you applying for or receiving financial support from other sources? YES / NO   *(If yes, please specify below)* | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | |  | |  | | | | | | | | | |  | |
| **Name of Award** | | | | | | | | | | | | | **Awarded By** | | | | | | | | | | | | **Amount** | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. How do you intend to finance your studies without financial aid?   *(Please attach supporting documents)* | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | |  | |  | | | | | | | | | |  | |
| 1. Have you ever been awarded any scholarship before? YES / NO   *(If yes, please specify below)* | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | |  | | | |  | | | | | | | |  | |
| **Year** | | **Name of Award** | | | | | | | | | | | | | | | **Awarded By** | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | |  | |  | | |  | | |  |  | |  | | | |  |  |  |  | | |  | |  |
| **Section I:** | | | **MISSION STATEMENT** *(not less than 500 words)* | | | | | | | | | | | | | | | | | | | | |  | |  |
|  | | |  | |  | | |  | | |  |  | |  | | | |  |  |  |  | | |  | |  |
| Please attach a statement explaining why you are applying for this scholarship. What are your goals and aspirations? What would you like to achieve after obtaining your degree / higher qualifications?  Postgraduate students are required to describe your reasons and motivation for pursuing a postgraduate degree. | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | | |  | | |  |  | |  | | | |  |  |  |  | | |  | |  |
| **Section J:** | | | **PROPOSED RESEARCH (For postgraduate students)** | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | | |  | | |  |  | |  | | | |  |  |  |  | | |  | |  |
| On a separate sheet of paper, please state your proposed research area and the details, and give the significance and aims of the research. Please include the name of your Professor / Supervisor, including his/her credentials. **(Please note that this is an important statement; based on which the Scholarship Panel will decide on the award of the Scholarship).** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |  |  | | |  | |  |
| **Section K:** | | | | **DECLARATION** | | | | | | | |  | |  | | | |  |  |  | | |  |  | |  |
|  | | | |  |  | | |  | | |  |  | |  | | | |  |  |  | | |  |  | |  |
| 1. I hereby declare that all the information provided by me in connection with this application is true, accurate and complete. I understand that any inaccurate, incomplete or false information given or any omission of information required shall render this application invalid and LBKM may, at its discretion, withdraw any offer of acceptance made to me on the basis of such information. I hereby authorise LBKM to obtain and verify any part of the information given by me from or with any source, as it deems appropriate. | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | | |  | | |  |  | |  | | | |  |  |  | |  | |  | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **PDPA Statement**   In accordance with the PDPA, please be informed that LBKM will cross-reference your Name, IC number, Institution, Course of Study, Year of Study and other relevant information, with your institution and other bursary/ scholarship awarding organisations to ensure the smooth processing of your application.  Please note that your contact information (Name, mobile and home telephone numbers, home address and email addresses) will be retained for the purposes of communication between you and LBKM, as a part of LBKM’s effort to keep in correspondence with you throughout the years as one of LBKM’s beneficiaries.  In discharge of its obligations under the PDPA, LBKM shall, on receipt of a written request by an individual, provide (a) personal data about the requesting individual that is in LBKM's possession or control and (b) information about the ways in which that personal data has been used or disclosed by LBKM within a year before the date of the request, as soon as reasonably possible.  You may submit a written request by email at [enquiries@lbkm.org.sg](mailto:enquiries@lbkm.org.sg)  If you wish to make a request to access the data that LBKM holds about you, please contact our Data Protection Officer in writing. LBKM will require you to verify your identity and to specify what data you require. LBKM may charge a reasonable fee to cover the cost of handing and processing your requests to access your data. Such fee will depend on the nature and complexity of your request. If LBKM intends to charge you a fee for processing your access request, it will provide you with a prior written estimate of the fee.  Please note that LBKM reserves the rights to reject any requests which LBKM considers have been made in bad faith or are otherwise vexatious or frivolous or have been exempted from access under the PDPA.  If you have any further questions regarding LBKM's data protection practices and policy, you may contact 6447 4770. | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1. **Voluntary Work Clause**   I agree to contribute at least 50 hours of voluntary work with LBKM and/or any other organisation/s (as LBKM deems fit) when called upon to do so by LBKM. | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Applicant's signature | | | |  |  |  | Date | | |  |  |