

SCHOLARSHIP SCHEME 2020

MAURITIUS INSTITUTE OF TRAINING AND DEVELOPMENT (MITD)

Application form for Scholarships for Diplomas/NC3/NC4/NC5/BT/City & Guilds Diploma Courses

The completed application form should be submitted by registered post or hand-delivered to the MITD Head Office, MITD House, Pont Fer, Phoenix by 30 October 2020.

| Pleas | e fill in block letters: | |
|---------|--------------------------------------|--|
| 1. | Personal details of app | |
| a) | Last Name of applica | ant: (Mr/Mrs/Miss) |
| b) | First name of applica | nt: |
| c) | Maiden name (if app | licable): |
| d) | Marital Status : Sing | gle |
| e) | National Identity Nur | mber: |
| f) | Date of birth: | |
| g) | | icate of naturalisation to be annexed |
| h) | Residential Address | |
| | | |
| | | |
| | | |
| i) | Telephone number: | Residence |
| | | Office |
| | | Mobile |
| j) | E-mail address | : |
| k) M | Situation of parents / Married Divo | family: rced Widow Single parent Other |
| l) [| Oo you perceive a Basi | c Invalidity Pension from the Ministry of Social Security? Y/N |
| m) | Are you registered ur | nder the Social Register of Mauritius (SRM)? Y/N |
| | Do you identify your arter 2017? Y/N | rself under the vulnerable groups as defined by the National CSR Foundation If Yes, please specify |
| | | |
| | | |

| (Tick Accordingly): | | |
|---------------------------|--|--|
| rses | | |
| C5/BT/City & Guilds D | Diploma courses | |
| 3T/City & Guilds Diplo | ma courses | |
| uans having successfull | ly completed NC | 23 courses at Le Chou Training Centre) |
| | | |
| | | |
| e: | | |
| arship is being applied f | or: | |
| | | |
| | | |
| accordingly) | | |
| (ccordingry) | | |
| Tick as appropriate | Amount (Rs) | |
| | Amount (Rs) | |
| Tick as appropriate | Amount (Rs) | |
| | Amount (Rs) | |
| | BT/City & Guilds Diploguans having successfulles: e: arship is being applied f | C5/BT/City & Guilds Diploma courses BT/City & Guilds Diploma courses guans having successfully completed NC e: e: arship is being applied for: |

| 4. Family Income |
|---|
| Father's occupation |
| Name of employer |
| Address of employer |
| Contact Details |
| Father's wages/salary Rs |
| Mother' occupation |
| Name of employer |
| Address of employer |
| Contact Details |
| Mother's wages/salary Rs |
| Other Income (Pension, Social Aid, etc.), if any Rs |
| Total Family Income Rs |
| (Photocopies of recent payslips and other evidences to be attached) |
| |
| 5. Educational qualifications: |
| Educational institutions attended: |
| Highest Qualifications obtained: |
| Date the qualifications were obtained: |
| |

6. Detailed Results:

School Certificate Results

| Cambridge School Certificate Year: | G.C.E. 'O' Level (Cambridge / London) Year: | Other Qualifications (Second, etc.) Year: | | |
|---------------------------------------|---|---|--|--|
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| Cambridge Higher School Certificate Resu | sults | R | Certificate | nool | · So | Higher | idge | nbi | Ca |
|--|-------|---|-------------|------|------|--------|------|-----|----|
|--|-------|---|-------------|------|------|--------|------|-----|----|

Year:
Rank:
Rank:
Ride: Science / Economics / Technical / Arts / Other (specify)

| Subjects | Subject Grade | Subjects | Subject Grade |
|-------------------|---------------|-------------------|---------------|
| Principal Level: | | Principal Level: | |
| Subsidiary Level: | | Subsidiary Level: | |
| General Paper | | General Paper | |
| | | | |
| | | | |

General Certificate of Education 'A' Level (Cambridge / London)

| | (0 | Cambrid | lge / London) | | | |
|--|------------------------------|---------|---|-----------------|---------------------------------|--|
| Month: Ye | Year: | | Month: | Yea | Year: | |
| Subject | Grade | | Subject | (| Grade | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Have you been previously nomi YES / NO If YES give details as follows: | nated for | a schol | arship? | | | |
| Scheme | Year | C | Course Applied for | Amount (Rs) | Offer accepted/ Not accepted | |
| | | | | | | |
| | | | | | | |
| which application for scholarship If "Yes" please provide the follow (i) Amount of Scholarship / Spons (ii) Name of Organisation / Institut (ii) Contact person from the Organ Name: | ing details: sorship / Fi | nancial | Assistance received Scholarship / Sponse | : Rs | Assistance | |
| 8. Declaration | | | | | | |
| I declare that, to the best of my kr and that no information which m agree to abide by the conditions at | ight affect | the dec | ision of SBM Foun | dation has been | | |
| Signature of Responsible Party / S | tudent (if a | bove 18 | 3): | | | |
| Name: | <u></u> | <u></u> | <u></u> | | | |

SBM FOUNDATION SCHOLARSHIP SCHEME 2020

| BANK DETAILS |
|----------------------|
| NAME OF TRAINEE: |
| NAME OF BANK: |
| BRANCH: |
| BANK ACCOUNT NUMBER: |
| |
| |
| SIGNATURE OF TRAINEE |

Documents to be submitted

- Application form duly filled in
- Photocopy of birth certificate of applicant and of his/her parents and photocopy of their marriage certificate
- Certified copies of results of NC3/SC/O level and HSC/International Baccalaureate or equivalent, and any other relevant qualifications held
- Photocopy of letter of offer/Evidence of enrolment specifying nature of course and course title
- Evidence that applicant's family household income does not exceed Rs 20,000 per month
- Evidence from the Ministry of Social Security that applicant comes from a family registered under the Social Register of Mauritius or from vulnerable groups as defined by the National CSR Foundation Charter 2017 (if applicable)
- Evidence from the Ministry of Social Security or the National Council for the Rehabilitation of the Disabled (NCRD) that applicant benefits from a Basic Invalidity Pension (if applicable)
- Proof of address (photocopy of a recent utility bill, less than 3 months old)
- Photocopy of the receipt of any payment effected to the MITD
- Bank Account Details

Originals of all documents will be requested at a later stage

NOTE: Late and incomplete applications will not be considered.