





## APPLICATION FORM FOR SOUTH WEST TERTIARY GRANT

| (I) APPLICANT'S F       | PARTICULARS   |                                 |  |  |  |
|-------------------------|---|---------------------------------|--|--|--|
| Name<br>(as in NRIC)    |   |                                 |  |  |  |
| NRIC No                 |   |                                 |  |  |  |
| Address<br>(as in NRIC) | (S)   |                                 |  |  |  |
| Email Address           |   |                                 |  |  |  |
| Payment Method          | PayNow (NRIC) Cheque payable name: I confirm the above method of paymedetails listed in this form is correct an Signature of Applican | ent for the disburs<br>nd true. | Cheque Pursement of my funds. The Date |  |  |
| Citizenship             |   | Contact<br>Details              | (HP)<br>(H)                            |  |  |
| Name of<br>Institution  | NYP / NP / RP / SP / TP<br>NUS / NTU / SMU / SUSS / SUTD /<br>LASALLE / NAFA  | SIT                             |  |  |  |

| (II) PARTICULARS OF FAMILY MEMBERS   |   |     |                            |      |          |    |   |  |  |
|--|---|-----|----------------------------|------|----------|----|---|--|--|
| Nam  | e | Age | Relationshi<br>to Applicar |      | ccupatio | on | Gross<br>Monthly<br>Income <sup>1</sup> |  |  |
|  |   |     |                            |      |          |    |   |  |  |
|  |   |     |                            |      |          |    |   |  |  |
|  |   |     |                            |      |          |    |   |  |  |
|  |   |     |                            |      |          |    |   |  |  |
|  |   |     |                            |      |          |    |   |  |  |
|  |   |     |                            |      |          |    |   |  |  |
| TOTAL MONTHLY HOUSEHOLD INCOME:  |   |     |                            |      |          |    |   |  |  |
| (III) APPLICANT CONSENT / DECLARATION  |   |     |                            |      |          |    |   |  |  |
| <ul> <li>Acknowledgement         <ul> <li>I understand that the personal data, information, and documents that I have provided (including such personal data, information and documents of my child / ward) will be used for the evaluation, assessment and administration of my application for assistance.</li> <li>I consent to allow information I have provided to be shared with other agencies for the purpose of assessing my eligibility; for assistance; for research purposes which will not identify specific individuals; or for other purposes allowed under Singapore law; and provide information about myself or my other household members even through I/We may no longer be receiving assistance.</li> </ul> </li> <li>Declaration         <ul> <li>I declare that I am currently a full-time student at the point of application.</li> <li>I declare that the information provided above is true and to the best of my knowledge.</li> <li>I undertake to refund the value of benefits received if any of the information is found to be false</li> </ul> </li> </ul> |   |     |                            |      |          |    |   |  |  |
| later on.  |   |     |                            |      |          |    |   |  |  |
| Applicant's Signature  |   |     |                            | Date |          |    |   |  |  |
| FOR OFFICIAL USE   |   |     |                            |      |          |    |   |  |  |
| Name of CO   |   |     |                            |      |          |    |   |  |  |
| Name of CD / DCD   |   |     |                            |      |          |    |   |  |  |
| I hereby APPROVE / NOT APPROVE this tertiary grant application.  |   |     |                            |      |          |    |   |  |  |
| Signature & CO<br>Stamp  |   |     |                            | Date |          |    |   |  |  |

<sup>&</sup>lt;sup>1</sup> **Gross Monthly Income** refers to the basic wages, overtime pay, comissions, tips, other allowances and one-twelfth of annual bonuses the employee earns per month. It does not take into account their flexible benefits etc. Should the family member earn from ad-hoc work, you may put the average of the wages earned, as reflected on the supporting documents submitted.

## **Application Eligibility Criteria**

- a. Full-time Student at Local Tertiary Institutions (Polytechnics / Universities / NAFA / LaSalle);
- b. Singapore Citizen or at least one immediate family member is a Singapore Citizen;
- c. Resident of South West District;
- d. Total Gross Monthly Household Income of \$3,500 or Per Capita Household Income of \$875, whichever is lower; and/or
- e. Discretion of the Grassroots Leaders for residents with exceptional family and financial difficulties.

## Applicant's Note

- 1. Applicants are required to submit the following supporting documents:
  - a. Applicant's NRIC.
  - b. Matriculation card and latest result slip that are legible. Latest result slip is applicable and compulsory for students from their second year of study.
  - c. Latest payslip / CPF Contribution History Statement of one year / Income Tax statement. This applies to all working and non-working members in the household, except for family members who are NSF / full-time students.
  - d. Self-employed persons should provide their latest Income Tax statement.
- 2. By completing this form, I hereby confirm that I understand and agree to all the requirements in this form and I also consent to the collection and use of my personal particulars by the People's Association and its affiliated organisations for the purposes of the South West CDC Tertiary Grant and to inform me of related talks. I agree to receive such information via email, mobile phone text messages, mail and/or phone calls. The People's Association would also take necessary safeguards will be taken to protect the security, integrity and confidentiality of my personal particulars.
- 3. Completed application are to be submitted to their nearest Community Club/Centre.