**USJ COMMUNITY Fellowship Application Form**

*As an international university, USJ is committed to providing equal opportunities to all its students, and this is reflected in the scholarship principles and operations.*

This document is the **USJ Community Fellowship Application Form**. To apply, fill-in this form and attach the required documents enumerated in the box below. The Office for Student and Alumni Affairs (OSAA) will **NOT** accept applications with incomplete documents. For further inquiries email OSAA at: osaa@usj.edu.mo or call: +853 8792 5654.

**ATTACH THE FOLLOWING REQUIRED DOCUMENTS IN THIS APPLICATION FORM**

\*All the documents (except the Imposto Profissional Pedido de Certidao 收益證明書 for the previous year) required for your application are the same as those being submitted to DSEJ for the Scholarships, Special Financial Assistance or student loans.

☐ Copy of ID Cards/Passport of all Family members **(all in ONE A4 paper)**☐ Copy of Student card(s) if any of the family member(s) is/are student(s) **(all in ONE A4 paper)**☐ Copy of Transcript of Records for the past Academic Year **(Year 1 Students Only)**
☐ Income Statement (full- time and part-time) of the family members from employer(s) **for the past 12 months** orImposto Profissional Pedido de Certidao (previous year) of family members 收益證明書 (from Finance Department)☐ Rental or mortgage contract of the applicant’s family (for owned property, provide **Property Registration Certificate**)
☐ Fellowship Application Letter
☐ Others:
**INTERVIEW SCHEDULE:**

**Received by: Date:**

Reference No.

**ACADEMIC YEAR /**

You are a(n): □ Local Student □ International Student

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| **APPLICANT’S INFORMATION** |
| Name |  | PHOTO |
| Gender |  | Date of Birth |  |
| Type of ID |  | ID Number |  |
| Nationality |  | Contact Number |  |
| Address in Macau |  |
| Should there be any recruitment for Student Ambassadors, would you be interested to apply? | □ Yes □ No |
| Should there be any Volunteer job requested by USJ, would you be willing to help? | □ Yes □ No |
| **ACADEMIC BACKGROUND (SECONDARY OR ABOVE)** |
| Name of the school/ instituteattended | Country | Period | Qualification Awarded |
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 You are a(n): □ Local Student □ International Student

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| **APPLICANT’S INFORMATION** |
| Name |  | PHOTO |
| Gender |  | Date of Birth |  |
| Type of ID |  | ID Number |  |
| Nationality |  | Contact Number |  |
| Address in Macau |  |
| Should there be any recruitment for Student Ambassadors, would you be interested to apply? | □ Yes □ No |
| Should there be any Volunteer job requested by USJ, would you be willing to help? | □ Yes □ No |

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| **ACADEMIC BACKGROUND (SECONDARY OR ABOVE)** |
| Name of the school/ instituteattended | Country | Period | Qualification Awarded |
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| **PROGRAM OF STUDY DETAILS** |
| Level of Program | □ Doctorate □ Master □ Licentiate □ Pre-University |
| Name of the program |  | Intake year |  |
| Your USJ Tuition Fees for this year |  | Student Number |  |

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| **ALL PROPERTIES OWNED BY THE APPLICANT’S FAMILY IN MACAU AND OVERSEAS**(including *housing property, shops, automobiles, ships, etc.*) |
| Item | Owner of theproperty | Address and registration number |
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| **HISTORY AND CURRENT APPLICATION OF FINANCIAL ASSISTANCE/SCHOLARSHIP** |
| Name | School/Institute | Type (Assistance/Scholarship/Loan) | Funding Organization | Total Amount in the PastWhole Academic Year |
| Applicant |  |  |  |  |
| Sibling (if any) |  |  |  |  |

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| **MORTGAGE/RENTAL/LONG TERM ILLNESSES OF THE APPLICANT’S FAMILY** |
| Address of properties (apartment, shop, etc)/ The name of the illness | Monthly Installment/ Rent/Expenses |
| 1 |  |  |
| 2 |  |  |

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| **FINANCIAL STATUS OF THE APPLICANT AND HIS/HER FAMILY MEMBERS** |
| Name | Relationship | Age | Occupation | Total Income in Macau and overseas for the Past 12 Months**or**Imposto Profissional Pedido de Certidao of last year (上年度收益證明) |
| Applicant | n/a |  |  |  |
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| Other Sources of Income in Macau and overseas (business, interest and investment income, rent, training subsidy, social welfare, etc.) \*If applicants' parents/guardians are (self-employed, unemployed, retired, disabled, etc), they are required to provide proof that they are financially able to cover all their family’s living expenses. |
|  |  |  |  |  |
| Total |  |  |  |  |

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| **APPLICANT’S PARENTS OR SIBLINGS NOT LIVING WITH THE APPLICANT** |
| Name | Address | Relationship | Age | Occupation | Annual Income |
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**DECLARATION:**I declare that the information which I have provided on this application form and the additional documents that I submitted relating to the financial aid process is complete, accurate, and true to the best of my knowledge. I also understand that furnishing false information may result in revocation of my financial aid or pursuit to legal actions.

*Applicant’s signature Date*

**Author:** USJ Scholarship and Fellowship Committee

**Approved by:** USJ Scholarship and Fellowship Committee

**Approval date: Approval date:** 30 August 2019

**Operational commencement date:** 9 September2019

**Version number:** USJ Community Fellowship Application Form 002