

**For official use**

**Application No: ………………….……**

**Date:……………………………….…....**

**Receiving officer name:**

**……………………………………………**

**APPLICATION FORM**

**FREDERICK UNIVERSITY AND FREDERICK INSTITUTE OF TECHNOLOGY SCHOLARSHIPS IN MEMORY OF MICHAEL FREDERICKOU**

**Academic Year 2025-26**

**Note: The application must be supported by the relevant documentation.**

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**Application Submission Deadline:** **01/08/2025**

**Announcement of scholarship recipients:** **29/08/2025**

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| 1. **SCHOLARSHIP FOR WHICH THE APPLICATION IS SUBMITTED**
 | **Mark (x)** |
| Full scholarships for new incoming Frederick University undergraduate student |  |
| Full scholarships for new incoming Frederick University undergraduate student who has resided in Kaimakli or Pallouriotissa for the past six years |  |
| Full scholarships for new incoming Frederick Institute of Technology student |  |

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| 1. **Candidate’s Personal Details**
 |
| **Surname** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Name**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Student Registration No**(if applicable) |  |  |  |  |  | **Telephone**  |  |  |  |  |  |  |  |  |
| Εmail  |  |
| **Permanent Address** |  |
| Temporary Address |  |
| Program of Study  |  |

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| 1. **Student’s Family Income**
 |
|  | **Occupation** | **Annual Income** |
| **Student** |  |  |
| **Father** |  |  |
| **Mother** |  |  |
| **Other Income \*** | **Details**………………………………………………………………………………………………………………………………………… | …………………………………… |
| **TOTAL INCOME** | € |

\* Other Income (income from rent, bank interest, unemployment benefit, child support benefit, minimum income allowance, pension etc.)

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| 1. **Other Information**
 | **Mark (X) or complete with a short description wherever necessary** |
| **Ages of other dependent\* children in the family** |  |
| **Orphan** |  |
| **Family in enclaved areas** |  |
| **Severe\*\* health problems**  |  |

\* Dependent children: children below 18 / high school students / university or college students / in mandatory military service

\*\* Severe health problems: 75% inability or 60% disability

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| 1. **Academic performance**
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| Overall grade in high school leaving certificate |  |

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| **6. Documents Submitted** |
|  | **Mark (x)** |  | **Mark (x)** |
| High school leaving certificate**(Required)** |  |  |  |
| Certificate of annual insurable earnings of last year for both parents, whether working or not **(Required)** |  | Certificate of annualinsurable earnings for last year for both parents,whether working or not **(Required)** |  |
| Certificate of orphanhood allowance |  | Certificate of inability pension |  |
| Certificate of disability pension |  | Pension certificate |  |
| Widow’spension certificate |  | Certificate of unemployment benefits |  |
| Certificate of minimum income allowance |  | Certificates for dependent children |  |
| Certificate from the Community Leader **(Required for scholarship applications for the full scholarship to a new incoming undergraduate student who has resided in Kaimakli or Pallouriotissa for the past six years)** |  | Other: |  |

Note: Applications with missing documents will not be evaluated.

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| **7. Declaration of Consent for the use of Personal Data**  |
| I confirm that all information and personal data provided in this application form are accurate and true. With this declaration, I provide my free and explicit consent to Frederick University for the processing of the personal data provided, in accordance with the European Legislation on the Protection of Personal Data (General Data Protection Act-Act.2016/679). I am aware that my personal data will be processed in confidence and security according to Frederick University’s Data Protection Policy: <http://www.frederick.ac.cy/privacypolicy>  |

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| **Candidate’s Signature** |  | **Date** |  |