

SCHOLARSHIP PROGRAMME

THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION scholarship programme was established to provide educational opportunities to students and to enable them pursuing studies until termination. All candidates applying for scholarship must meet the following criteria:

- **Philippine, French or Canadian nationality**
- **must be able to demonstrate financial need**
- **proof of above-average study record**

In order to apply for the scholarship programme students must submit a completed application form including supporting documentation as requested hereinafter.

All supporting documents and certificates must mandatorily be in English or French!

All applicants must authorise the release of any information relating to their application to THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION. Information may be requested from educational institutions, government, community or any other sources, and may include personal evaluations and transcripts. Submission of up-to-date documentation convincingly proving financial need is absolutely indispensable. **Misrepresentation, incomplete or false information will result in removal from the application process or, if detected after approval or release of funds, in immediate loss of support and action for repayment.**

The award of scholarships is subject to availability of funds and valid for one school year. Scholarship shall serve the purpose to cover school fees such as tuition fees and miscellaneous fees typically collected by schools in the course of enrolment. Costs for books invoiced by the school may be considered.

All distribution of funds is limited to the amount awarded as scholarship and will be executed exclusively to the accounts of educational institutions directly, for the sole purpose of settling aforementioned costs in favour of an approved applicant. Any payments will be effected solely upon presentation of duly issued invoice/receipt meeting all formal requirements as stated hereinafter, in the Applicant Information Sheet or as announced by the Recommending Institution.

The submission of an application does not constitute any legal claim to be awarded scholarship.

RECOMMENDING INSTITUTION: Please ensure that the following documents are enclosed: Official documents clearly proving continuance of financial need, e.g. tax returns, tax exempt certificate, certificate of indigency (of parents and any other persons living in your household) officially filed with federal and/or state tax authorities for 2019 and, recent Academic Transcripts.

NOTE: Applications not entirely meeting all requirements are incomplete and shall be removed from the selection process! Documents in languages other than English or French are not accepted.

APPLICATION FOR RENEWAL OF SCHOLARSHIP 2022/2023

Complete this form and return together with all documents as requested and including the signed Applicant Information Sheet to:

Recommending Institution	
Contact Person	

PART 1: Personal Details

FULL NAME	
<input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr	
Family Name	
First Name	
Middle Name	

HOME ADDRESS	ADDRESS FOR CORRESPONDENCE (if different)
Apt/Street	Apt/Street
City	City
State /Province	State /Province
Postal Code	Postal Code
Telephone	Telephone
e-mail	e-mail

Date of initial acceptance in the scholarship programme:

Schoolyear	
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PART 2: Financial Data

Scholarship is renewed only if continuance of financial need is convincingly proven!

Total funds available	
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ESTIMATED COSTS FOR INTENDED EDUCATION (for <u>entire</u> schoolyear; all data in <u>US-Dollar!</u>)	
Tuition fees	
Books (invoiced by school)	
Total	

Submission of up-to-date documents proving continuance of financial need is absolutely indispensable! Documents accepted as proof must be officially filed with federal and/or state tax authorities for 2020, e.g. tax returns, tax exempt certificate, certificate of indigency (of all persons living in the household!).

Incomplete or false information causes immediate elimination from application process!

RECOMMENDING INSTITUTION:	
Correctness of data approved	_____ (Signature)

PART 3: Intended Education

EDUCATIONAL PROGRAMME FOR WHICH SCHOLARSHIP IS REQUESTED

All questions must be answered!

Course of studies applicant is enrolled in:

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Educational Institution:

Exact Name	
Address	
Street	
City	
State/Province	
Postal Code	

Beginning of studies:

Month	School year
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Minimum study duration according to degree programme:

Years

Scheduled date of termination/graduation:

Month	Year
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ACKNOWLEDGEMENT AND AUTHORISATION

I certify that, to the best of my knowledge, the information in this application form and in all the accompanying documents is true, accurate and correct.

I authorise THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION to collect information about me from me; from educational institutions, government, community or any other sources available; and from references I have provided. The information collected may include but is not limited to personal evaluations and transcripts.

THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION is authorised to unrestrictedly use all information received for any purpose in connection with the THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION scholarship programme, including publicity and promotions, and may share it with anyone who works with or for THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION, as far as it is considered necessary to implement statutory and legal regulations THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION is subject to.

I understand that this application will not be valid unless it is duly signed and dated. I understand that irrespective of the eligibility of an applicant THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION reserves the right to remove this application from the application procedure and/or deny the award of scholarship without giving reason. I also understand that no materials will be returned.

NOTE: All questions must comprehensively be answered. Please ensure that all documents as requested are enclosed. Documents must fully comply with all requirements as specified herein or in any other document or communication relating to the application procedure.

INCOMPLETE APPLICATIONS WILL BE REMOVED FROM THE SELECTION PROCESS!

_____ Date

_____ Applicant's signature
(signature over printed name)

FOR USE OF RECOMMENDING INSTITUTION ONLY

<input type="checkbox"/> Approval	<input type="checkbox"/> Denial
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_____ Date

_____ Signature

Return complete application with your signature affixed to the following address:

**THE EDWARD AND EVA UNDERWOOD CHARITABLE FOUNDATION
Kirchstrasse 3
9490 Vaduz
Liechtenstein**