COMMONWEALTH SCHOLARSHIPS

FOR ACU USE ONLY

All sections of the form must be completed

COMMONWEALTH
SHARED SCHOLARSHIP SCHEME

Nominating Institution:*

1. SURNAME: MR/MRS/MISS/MS

2. FIRST NAMES:

3. DATE OF BIRTH:

4. NATIONALITY:

5. HOME ADDRESS:

6. CONTACT ADDRESS (if different from above):

7. EMERGENCY CONTACT NUMBER: Telephone:
Fax:
E-mail:

*The name of the nominating institution must be inserted

Please note that you may need to be contacted at very short notice about administrative arrangements relating to your award (travel to the UK etc), and it is essential that you supply an emergency contact number. Courier letters cannot be delivered to PO Boxes.

PLEASE TURN OVER

COMMONWEALTH SCHOLARSHIPS

FOR ACU USE ONLY

8. QUALIFICATIONS ***(NB: Candidates are expected to hold or to have obtained by the time they take up their SSS award the equivalent of an Upper Second Class degree)***

Institution	Qualifications	Class or Grade	Date obtained

9. EMPLOYMENT

Are you currently employed? YES / NO *(delete as appropriate)*

10. Please give details of your employment history – please include periods of National Service and unemployment

From	To	Post held	Name and address of employer

11. COURSE APPLIED FOR:

Course title and subject	Length	Start date	End date

12. DATE FORM COMPLETED: .....

SIGNATURE OF CANDIDATE: .....

Note to nominating institution: completed Forms "D" and "E" must accompany this form

COMMONWEALTH SCHOLARSHIPS

COMMONWEALTH
SHARED SCHOLARSHIP SCHEME
DEVELOPMENT STATEMENT

Candidates are asked to provide a statement of 300 words explaining how the proposed study will benefit their home country; and to describe the particular skills that they seek from the proposed qualification and how these will be applied on their return. References to any existing national shortages or needs would be particularly welcome.