بسم الله الرحمن الرحيم

Islamic University of Maldives – IUM
Violet Magu, Henveiru, Male' City , 20037
332-2718 | 3316870
info@ium.edu.mv

ISLAMIC UNIVERSITY OF MALDIVES

Scholarship Application Form

WRITE CLEARLY IN BLOCK LETTERS, IN BLUE OR BLACK INK.

1. Personal						
Name				Sex	☐ M ☐ F	PP Photo
Permanent Address (including Atoll/Island)						
Current Address			Tel			
Date of Birth (D/M/Y)						
ID No.						
Marital Status	☐ SINGLE ☐ MARRIED ☐ DIVORCED	Number of Children		Their ages		

2. Employment (start from the most resent)			
Start Date	End Date	Post	Office

3. Educational Qualification				
Tertiary & Higher Education				
Institute / Country	**Attainment (Certificate/Diploma/Degree received**	**From**	**To**	**Funding Scheme**

4. Training currently being undertaken

Institute	Programme	Level	End Date	Funding Scheme

5. Desired Course			
Course name		Level	
Institution		Country	

6. Service Bond Records				
Nature of Bond (studies / training course / paid leave)	**Bond Duration**	**Date Began Service**	**Date of Bond Completion**	**Status (completed / deferred / serving)**

7. Parent / Guardian / Spouse		
Name & Address of	☐ Parent *OR* ☐ Guardian *OR* ☐ Spouse	Tel

8. Applicant's Declaration
I certify that the information provided about me in this application is correct and I enclose the documents required to support my application. I acknowledge that the supply of incomplete or false information may lead to my disqualification. If my application is accepted, I undertake to abide by the regulations of the Government. Signature of the Applicant: Date: