

SCHOLARSHIP APPLICATION

- B.B.A. Program in Hospitality Management (International Program)
 B.B.A. Program in Professional Culinary Arts (International Program)

Date: ___/___/___

 Entrance Exam ID: _____**1. Last Name (Family Name)****First Name (Given Name)**

2. Personal Information

Date of Birth (MM/DD/YY): ___/___/___

Age: _____ years old

Gender: Male Female

Country of Birth: _____

Country of Citizenship: _____

Religion: _____

Current Address (Mailing Address):

Telephone Number: _____ E-mail Address: _____

House Owners: Parents Siblings (Relation: _____) Dormitory

Urgent Contact: _____ Telephone Number: _____

3. Educational BackgroundName of Institution: _____ Governmental PrivateLevel: High School Certificate Diploma Others GPA: _____**4. Financial Support for Education** Parents Siblings (Relation: _____) Others _____**5. Family Information**

Father's Name: _____

Age: _____ years old

Occupation: _____

Work Place: _____

Position: _____

Telephone Number: _____

Telephone Number: _____

Mother's Name: _____

Age: _____ years old

Occupation: _____

Work Place: _____

Position: _____

Telephone Number: _____

Supporter's Name: _____

Relation: _____

Age: _____ years old

Occupation: _____

Work Place: _____

Position: _____

Telephone Number: _____

6. Background about Other Scholarships

Student never receives any scholarship.

Student received other scholarships.

Scholarship Name: _____ Year: _____

7. Additional Information

Talents (Attached files): _____

Other Information: _____

