#### **SAWL SCHOLARSHIP FUND**

This SAWL Scholarship Fund was set up by the Singapore Association of Women Lawyers to provide financial assistance to needy and physically/intellectually disabled students.

The Scholarship may be granted to the following applicants who **require financial assistance**.

	Types of Award		Maximum Amount*
A	Secondary school	For applicants who are studying in any of the secondary levels, namely secondary one to secondary five, in 2025. (Note: Students with Dyslexia are not eligible to apply.)	S\$800 per year
В	Institute of Technical Education	For applicants who are pursuing courses in such institutions.	S\$1,400 per year
С	Junior College/ Pre-University/Polytechnic	For applicants who are pursuing courses in such colleges/institutions.	S\$3,000 per year
D	Tertiary Education	For applicants who have been accepted to study in the local universities in Singapore, for the academic year 2024/2025.	S\$8,000 per year
E	Special Schools	For applicants with special needs, Autism Spectrum Disorder and/or intellectual disability pursuing courses in such institutions.	S\$2,000 per year

<sup>\*</sup>Or at the discretion of the Trustees.

- 1. In order to qualify for the Scholarship, a candidate must be:
  - a) either a Singapore citizen or a permanent resident of Singapore;
  - b) physically/intellectually disabled (including one who is receiving services from any approved charity as defined under the Income Tax Act (Chapter 134) or any society duly registered under the Societies Act (Chapter 311)), who is in need of financial assistance: and
  - c) Pursuing secondary level or higher education in Singapore.
- 2. The Scholarship shall be tenable for the prescribed period. Applications for the Scholarship shall be submitted **yearly** using the forms attached.
- 3. The Scholarship may be awarded to any candidate at the discretion of the Trustees provided that no award shall be made in any year in which the Trustees consider there is no candidate of sufficient merit.
- 4. The Trustees may revoke or suspend the Scholarship for such period as they think fit if the conduct or academic progress or performance of the holder of the Scholarship is considered unsatisfactory.
- 5. Any applicant who provides false particulars/information or intentionally/wilfully withholds information will be disqualified from consideration for the Scholarship, or if the Scholarship is already awarded, any funds disbursed shall be repaid by the applicant.
- 6. The Trustees may reject any application which is incomplete or is inconsistent with the objectives of the Fund and need not provide any reasons for non-selection of applicant.
- 7. The list of names of successful applicants will be sent to the relevant schools/institutions after the Trustees have reviewed the applications.
- 8. The total amount of the Scholarship award will be sent by bank transfer to the relevant schools/institutions for the teachers to disburse the respective amounts to the successful applicants. For tertiary students, the award will be sent by bank transfer to their respective bank accounts.
- 9. The closing date for applications for the above Scholarship Awards shall be **30 September 2024**.

#### INSTRUCTIONS

- 1. Type or write clearly. Check the applicable boxes. Enter **NA** where not applicable.
- 2. Attach required supporting documents (please refer to **CHECKLIST**).
- 3. Kindly mark against the **CHECKLIST** below to ensure that you have done all that is required.
- 4. Submit the completed form with supporting documents to the Trustees at the following address:

SAWL SCHOLARSHIP FUND
C/o Ms Foo Siew Fong
4 Shenton Way #08-05 SGX Centre
2 Singapore 068807

# SAWL SCHOLARSHIP FUND (for students with special needs)

## **CHECKLIST** – Did you attach the following to your application?

Copy of the applicant's BC / NRIC (whichever is applicable).	Yes
Copies of the applicant's: - a) previous one-year academic results; AND b) current midyear academic results or alternatively; c) learning reports which are written by schools once a year.	Yes
2 recent testimonials of good character of the applicant.	Yes
Medical report <i>OR</i> letter from school / institution /association evidencing the applicant's physical or intellectual disability.	Yes
Documents evidencing the applicant's parents' income, namely: a) IR8A for 2024, OR b) IRAS Notice of Assessment, OR c) letter from the employer confirming the salary.	Yes
Letter from the school / institution indicating the course that the applicant is taking for Awards <b>B</b> , <b>C</b> and <b>D</b> .	Yes
	Copies of the applicant's: - a) previous one-year academic results; AND b) current midyear academic results or alternatively; c) learning reports which are written by schools once a year.  2 recent testimonials of good character of the applicant.  Medical report <i>OR</i> letter from school / institution /association evidencing the applicant's physical or intellectual disability.  Documents evidencing the applicant's parents' income, namely: a) IR8A for 2024, OR b) IRAS Notice of Assessment, OR c) letter from the employer confirming the salary.  Letter from the school / institution indicating the course that the

INCOMPLETE APPLICATION FORM AND/OR WHICH HAS MISSING SUPPORTING DOCUMENTS WILL BE REJECTED

## **APPLICATION FORM**

# **SAWL SCHOLARSHIP FUND (for students with special needs)**

TYPE OF AWARD applied for: -						
<ul><li>A. Secondary School</li><li>B. Institute of Technical Education</li><li>C. Junior College/Pre-University/Polytechnic</li><li>D. Tertiary Education</li><li>E. Special Schools</li></ul>		(				
PART 1: Applicant's Particulars						
NAME (As stated in NRIC. Underline surname):						
NRIC/Identity card No.:	NRIC/Identity card No.:					
RESIDENTIAL ADDRESS:						
CONTACT NOS. (applicant/guardian): Ho	ome:Mobile:					
BANK NAME & ACCOUNT no. (for Tertian	y students):					
DATE OF BIRTH:	*CITIZENSHIP: Singaporean / Singapore	PR				
EMAIL (applicant/guardian):						
DART 2. Applicant's Family's Porticulars						

#### PART 2: Applicant's Family's Particulars

NO.	Name & Birth Cert/NRIC No	Relationship	Age	Occupation & Name of Employer / School	Gross Monthly Income*
1		FATHER			
2		MOTHER			
3		BROTHER			
4		SISTER			
Gross Household Income					

#### PART 3: Applicant's Bursaries/Scholarships

. Are you a previous recipient of th	is scholarshi	p? Ye	es No	
. Are you receiving other forms of	bursaries or s	schol	arships? Yes No	
. If <b>YES</b> , please provide details of	name of instit	tution	and amount grant	ed
Name of institution:			Amount:	S\$
PART 4: Applicant's Medical Info	rmation			
		مريام	iaallu kandiaanna	1 / h a a via a iva a a iva
. Please indicate your disability (e.	g. visually or	pnys	ically nandicapped	i / nearing impaired,
			,	
ART 5: Applicant's Educational	Fstablishme	ents/	Attainments	
				1
School / Institution	From	То	Exams passed	Year graduated
	_			
PART 6: Applicant's Other Inform	nation (if appli	cable)	Please attach addition	al sheet if necessary.

PART 7: Other Information from Applicant's Principal/Lecturer/Teacher/Tutor (if applicable) Please attach additional sheet if necessary.				
documents are understand that	m that the information on this applica e true and correct and I have not wilfully at submission of false particulars or with from consideration and I will have to rep	withheld any material information. I wholding of material information will		
Date	Signature of Applicant / Guardian*	Name of Applicant / Guardian*		
complete and a	ned, support the above applicant's applicant all supporting documents are attached and documents are true and correct.	cation and confirm that the application is and that all the information contained in the		
 Date	Signature of Principal / Lecturer / Teacher / Tutor*	Name of Principal / Lecturer / Teacher / Tutor*		
Name of School	ol / Institution / University:			
Address of Sch	nool / Institution / University:			
Telephone No.	. of School / Institution / University:			
Email Address	of Lecturer / Teacher / Tutor*:			
School/Instituti	ion's Bank account name and no.:			
*Please delete wi	here not applicable.			

<u>Personal Data Protection Notification</u>
By signing on this proposal or application form, I consent to the SAWL Scholarship Fund collecting, using, disclosing and/or processing My personal data for the Purposes as described above.