

01 ځېږ 2018 ځ نيمېر موټرکېر کرکېر ځېرټرکې شرکېکې شکېږکو نيمېر موکوکر کرکېدکې کرکېکې کرکې کوکې

Secretariat of the Faadhippolhu Atoll Council Naifaru, Republic of Maldives

Faadhippolhu Vinavi Scheme May 2018 Secretariat of Faadhippolhu Atoll Council

- Please fill the form clearly in BLOCK LETTERS.
- Please read carefully the regulations and procedure stipulate in the "Usoolu" for "Faadhippolhu Vinavi Scheme" before filling the application form.
- Candidates should submit documents required for verification of the information provided. If supporting documents are missing, points will not be awarded for the respective area.

Paste recent passport photo here

مِعْعَدْ: مِيدَمِدُ عَمِمَدُ تَبْرُدْدَمِ مَدْدَمَ تَدْوَمُوْدُ مَوَمَ مَدْدَى مِرْزُ حَمَّرُوْمُدُ مِرْدِوْمَرَ مَدْتَوْمَرُ تَرْسَرُوْ دَمٍ مِمْرُنَدْدَهِ مِعْرَدَوْتَ شَرِعَمْدُ مِورَدِوْ شَرِدُ تَرْسَمُ عَمِوْنُمُوْتَرُدُ شَرِدُ رَمِعْ مَسَمْدُ مَدْنَمُوْشَدْدُ. مَمِ نَسَاشَةُ تَمْدُدُ حَمِدُ مُرْمِهُ مُوَمَّدُ رَمِعْ رُغُوْتُرُوْ تَسْرَوْ مُوَدِعَةً مَدْنَدُ مَدْنَمُوْشَدُوْ. مَمِ نَسَاشَةُ تَمْدُدُ حَمِدُ مُوَمِدُ مُوَدُّ مُرْمَدُ مَدِي

1- Application category	Tick (✓)
New student	
Current Student (ongoing)	

2-	2- PERSONAL DETAILS										
	Mr.		Mrs.		Miss.	Date of Birth: Nationality:	-	Sex	: Male		Female
Full Name as in ID:				ID No:		Marital Status:					
						Single		Married			
Present Address in full:			Home Tel:		Ema	ail:					
Duration at this address:				Mobile:							
Perr	Permanent Address in full:										

3- PROPOSED COURSE (From Skill Shortage List – Annex 3)					
Course Field: (Eg. Engineering)	Course Level: (Eg. Bachelor's Degree)				
Course Name: (Eg: Bachelor of science in electrical engineering)	Duration:				

4- AVAILABILITY OF SPONSORSHIP

Have you got an offer of sponsorship or a scholarship from the GOVERNMENT / Private Sector or from any other sources to study for your proposed course? If yes, please give the details of the		No
offer and the reason why you are seeking financial assistance under this scheme.		

5- LOAN STATUS		
Do you have an outstanding loan at DEFAULT in the Bank of Maldives or Lhaviyani Atoll Fund? If	Yes	No
you are paying loan regularly or according to the schedule then your loan will <u>NOT</u> be considered as a loan at <i>DEFAULT</i> .		
Do you have an outstanding student loan in the Bank of Maldives or at the Department of Higher Education?	Yes	No
If yes, Please submit the evidence that the repayment is regularly made. Copies of the Bank letters, repayment slip, etc. can be submitted as evidence.		
L CARLES LA LA CONTRACTOR	1	

Yes

No

6- EMPLOYMENT STATUS

Are you employed at the moment?

If yes, please present letter authorizing your release for the course if you are selected.

7-	SERV	/ICE	BOND

Do you have a bond to serve the government? If yes,a. Please write the name of the course for which financial assistance was granted.						
 Provide evidence of your service to the government / state after completion of your sponsored course. Letter from the employer will be required as evidence and should include the date of commencement and the date of termination from the job. If you have not served an existing bond, please provide evidence that you have been exempted from your service bond. b. Please write the name of the office that sponsored your course for which you have been bonded. 						
8- DETAILS OF YOUR GUARENTOR						
Name: Present Address: Permanent address:						
Your Relationship: ID NO:						
• Guarantor will be required to sign in the official agreement if your application is successful.						
• Guarantor must have a blood tie to a member of the immediate or extended family of the candidate as per the article No. 24 of the "Faadhippolhu Vinavi Scheme (New Student) Usool" and article No. 23 of the "Faadhippolhu Vinavi						

Scheme (Current Student) Usool".

9- EDUCATIONAL QUALIFICATIONS

Please tick the columns to indicate all levels of education you have completed including the highest level and submit attested originals of accredited copies of all qualification mentioned here.

#	Categories	Categories						
1	MNQF Level 9 (Masters)							
2	MNQF Level 7 or 8 (De	egree)						
3	MNQF Level 6 (Advanc	ce Diploma)						
4	MNQF Level 5 (Diploma)							
5	Others (Please Specify)							
6	A/L or Equivalent							
7	O/L and Foundation or Advance Certificate							
8	O/L or Equivalent							
Please provide the details of funding received for all the qualifications listed from 1 to 5 in the above list.								
	Course Name	Funding type and details:	Name of the sponsor:	A mount of	Dura	tion		

#	Course Name:	Funding type and details: (Choose from below) Eg: 3 Partial loan	Name of the sponsor: (Eg: Ministry of Health)	Amount of	Duration		
	(Eg: Diploma)			sponsorship	Start Date	End Date	
1							
2							
3							

Did you receive any other financial assistance addition to what you have mentioned above under 7? (Eg: Hunaru program)	Yes	No
If Yes, Please specify.		
Are you doing a course at the moment?		No
If Yes, Please give the date of commencement of the course.		
Current Semester (eg: Semester 2) ?	<u> </u>	
(Ongoing students only)		

10- RELATIVE'S DETAIL	LS						
RELATIVE NO. 1 who could	provide information ab	out you					
Name:	Relationship:	Home Address:	Workplace and Ad	dress:			
		Tel:	Tel:				
RELATIVE NO. 2 who could	provide information ab	out you	·				
Name:	Relationship:	Home Address:	Workplace and Ad	dress:			
		Tel:	Tel:				
Please provide contact number	rs of family and close re	latives who can be contacted ir		•			
1- Name:	Relat	ionship:	Contact no:				
2- Name:	Relat	ionship:	Contact no:				
3- Name:	Relat	ionship:	Contact no:				
Please check whether your application is complete and the following documents are included: ✓ Main Document to be submitted with the application form							
Completed application	form.						
Copy of National ID ca	ard of both candidate and	financial guarantor.					
No objection letter from	n the employer that you	will be released to study as a full	time student.				
Official document as e	vidence of bond service.	(applicable for candidates who h	ave a service bond)				
Attested original of all	certificates stated in part	9					
Validated original / cop be an attested original)		tes (If submitting a copy of the v	alidated certificate th	ne copy i	must		
Attested original of tra	nscripts (Full transcripts)	(If exemption were given for an urses from which exemption were		nodules,			
		ble at an institution of the stated		uments f	rom		
Document to proof if y	ou doing a course at the	moment (online documents from	websites are accepted	ed)			
(Please check each sec	All other supporting documents required to provide the validity of the information provided where necessary. (Please check each section thoroughly)						
If applying for Nursing / Other allied health professional courses. Submit relevant documents to prove your eligibility for the applying course from the Medical Council or Nursing Council or Maldives Board of Health Sciences.							
 ✓ Have you been nominated If yes please specify 	for a government schol	arship or student loan right no	ow?	Yes	No		

APPLICATION'S DECLARATION

I certify that the information provided about me in this application is corrected and I enclose valid documents required to support my application. I understand that the provision of incomplete or false information may lead to my disqualification. If my application is accepted, I undertake to abide by the regulations stipulated in the "Faadhipolhu Vinavi Usoolu".

הארים להשצבת לתשל הר הלכת הת הנוצ לאבל הציע

אל ז: היינצי אישאת בפרשל בשרית ברובה הציא גבובים ארגו אל איני

Note 2: please ensure you obtain a receipt on handover of the documents.