**DAF SCHOLARSHIP APPLICATION**

**THIS FORM MUST BE COMPLETED BY THE GUARANTOR**

To apply for a DAF Scholarship, it is an essential condition that it is processed by an approved guarantor of the FOUNDATION DAF. Therefore, the **email address and the name of the guarantor** must be indicated. The Foundation DAF will check if the guarantor belongs to DAF’s guarantor network.

**(All fields marked with \* are mandatory)**

1. Email address of the guarantor\*

Email address of the guarantor

2. Name of the guarantor\*

Full name

3. Full name of the applicant/student \*

Full name

4. Relationship with the applicant\*

Guardian, Teacher, Family, Others.

5. Postal address of the guarantor \*

Street, Number, Floor, City, Province, State, Postal Code, Country (Please Respect This Order)

6. Telephone of the guarantor \*

With the country and state or province code

7. Studies for which you request the DAF scholarship\*

Studies you wish to undertake

8. Qualities of the applicant/student \*

Responsibility, academic performance, economic situation

**Terms and conditions that the applicant must accept. The applicant/student (or legal guardian), accepts the following conditions to formalise the request.**

The guarantor **guarantees the veracity of the data provided** by the applicant and understands the terms and conditions indicated hereunder.

9. **The applicant/student (or legal guardian), has read and understood the following terms and conditions and hereby declares:**

\* Please select all that apply.

[ ]  I give permission to the representatives of my study centre to provide all the academic information required for the DAF Scholarship application.

[ ]  I understand that this application is available for the qualified representatives who need to see this information during the scholarship award process.

[ ]  I agree to maintain communication with DAF and share my notes. I confirm that all the information I have provided to my guarantor is true.

[ ]  My application and participation in DAF Scholarship Program for academic training, shall be governed by the provisions set forth in their terms and conditions, which I hereby declare that I understand and accept.

[ ]  I agree and accept that the personal data I submit will become part of a file owned by the Foundation DAF which is duly registered at the Data Protection General Registry (Spain).

[ ]  I expressly authorise the Foundation DAF to process my personal data collected in the registration form, and all documents submitted under the terms of this application, in order to manage my participation in this call.

[ ]  I guarantee that the Personal Data provided on this application is true, and I am responsible for notifying any changes thereto.

[ ]  I expressly authorise the Foundation DAF to send information by mail, e-mail or equivalent, of updated information on job opportunities or training activities which the foundation is aware of and may be of interest to me.

[ ]  I have been adequately informed about my rights of access, cancellation, rectification and opposition, which I can exercise in writing to **Fundación DAF**, at the following address: Calle Moros 16, 2º, CP 33206 Gijón, Asturias, Spain or by e-mail at the following address:**info@fundaciondaf.org**

10. Full name of the applicant/student \*

Full name

11. Gender \*

Mark only one box.

12. Name of the parent or legal guardian \*

Full name

13. Place of signature of this informed consent and terms \*

Town/city, province, state, postal code, country (please respect this order)

14. Date of signature of this informed consent and terms \*

15/12/2012

Example: 15 December 2012

Signature\*

**PERSONAL INFORMATION**

Fill in the following data of the student/applicant:

15. Full name of the student/applicant\*

Full Name

16. Date of birth \*

15/12/2012

Example: 15 December 2012

17. Permanent residence\*

Postal address, indicate street, no. and floor

18. City \*

 Insert the city of residence

19. State/Province/Country \*

*Insert province/state*

20. Postal Code \*

Insert Code

21. Telephone \*

 *With the country and state or province code*

 22. E-mail address of the applicant/student\*

If the applicant does not have an e-mail address, please indicate a contact email.

*Insert A Valid Email Address*

23. Studies for which the scholarship is requested \*

*Insert field of studies*

24. School where you are requesting admission \*

*Insert The Names In Listed Form If There Is More Than One*

25. Postal address of the school/university \*

*Indicate street, no., city, province, state, postal code and country*

26. Email address of the school/university \*

Insert A Valid Email Address

**PARENTS/LEGAL GUARDIANS INFORMATION**

Data from parents, relatives or guardians responsible for the applicant:

27. Name of the parent or legal guardian \*

Full name

28. Occupation \*

Job position

29. Telephone(s) \*

Please specify, if there is more than one telephone number

With the country and state or province code

30. Postal Address \*

Street, number, floor, city, province, state, postal code, country (please respect this order)

31. Email address

If you have one

Insert a valid email address

32. Number of siblings \*

33. Age of siblings \*

Insert the number of siblings separated by commas

34. Do they all live at home? \*

Mark only one box.

**FINANCIAL INFORMATION**

Estimated costs for tuition fees, books, transport, etc.

35. How much does the tuition for this course or academic year cost? \*

Insert the amount in US Dollars or Euros

36. How much do the books cost for this course? \*

Insert the amount in US Dollars or Euros

37. If you need transportation, how much will it cost per month?

Insert the amount in US Dollars or Euros

38. You will live in \*

Indicate a place, mark only one box

39. How much does the food cost per month? \*

Insert the amount in US Dollars or Euros

40. How much does the accommodation cost per month?

Insert the amount in US Dollars or Euros

41. TOTAL estimated cost per academic year \*

Insert the amount in US Dollars or Euros

42. Level of studies \*

Mark only one box

43. Duration of studies \*

Indicate courses or academic years

44. Degree obtained upon graduation \*

Indicate courses or academic years

**COVER LETTER**

**The guarantor shall attach to this application a cover letter written by the candidate as described below:** personal experiences and merits, family history, volunteering work performed, awards received, etc... **(maximum 1000 words)**

45. Please enter below all those experiences and merits that you consider relevant for obtaining a DAF scholarship \*

We would also like to know how you could help others in the future. This part is very important for us, because we expect that you commit yourself with girls in your environment that require vocational training or other type of studies, once you are working.

Experience and merits, family history (maximum 1000 words)