

Campaign for Education (CE)



CE is registered with the Government of Nepal in Kathmandu and the Social Welfare Council.

Financial Assistance Renewal Application Form (2014)

Renewal Student Application Form – 2014

A complete application to CE for financial assistance requires

- Part 1 and 2 of this form **completely** filled and **submitted** by **Poush 17th, 2070 B.S.** (January 31st, 2014).
- Mark-sheet and attendance record of the previous grade (from academic year 2070 B.S.)

(Note: If the mark-sheet for last year is not yet available. Please send the form as soon as possible. You can send the mark-sheet later. However the application will not be considered for renewal until the mark-sheet is received.)

NCEF Area (Please select one):

- Chitwan
- Kathmandu
- Lamatar
- Patan
- Sunsari

- Dolakha
- Kavre
- Nepalgunj
- Sindupalchowk
- Urlabari

Please mail the application to:

Campaign for Education

GPO Box 24698
Kathmandu, Nepal

OR

You can email the application to:

applications@nepalchildren.org

Part 1: Information from the Applicant

1. Information from the Applicant			
Name of the Student:			
	<i>Last</i>	<i>First</i>	<i>M.I.</i>
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age (in years):	
Permanent Address: <i>(say N/A if not available)</i>			Passport Size photo of the applicant (Taken in the past 9 months)
Temporary Address: <i>(N/A if not available)</i>			
Contact Telephone <i>(if possible, please provide at least one):</i>	Home: _____ Office: _____	School: _____ Other: _____	
Map and Directions. Please draw a map to this applicant's residence and intended school with any relevant directions. Also please specify the distance from home to school and means of transportation e.g. 10 minutes by walking or 10 minutes by rickshaw etc.			

2. Educational History

Name of the school currently attending:	
Address of the school:	
Grade (Class) this academic year (2070 B.S.):	
How many days this academic year was the student absent from school?	_____ days out of _____ total school days
Where did the student rank in his/her studies last year?	<input type="checkbox"/> Top half <input type="checkbox"/> Bottom half

3. Health Information

Does the applicant suffer from any disability or health problem? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, describe the disability or health problem
Was the applicant hospitalized within a year? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Why? When? For how many days?

4. Family events

Were there any major events in the applicant's family last year (death, birth, major illness, marriage) <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, describe the event(s)

5. Family income

What was the family income during the past year?	Rs.
Did the family income change during the past year compared to the year before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, mention the change in amount Rs.

Do you have any of the following (check all that apply)?	<input type="checkbox"/> Mobile Phone <input type="checkbox"/> Television <input type="checkbox"/> Radio <input type="checkbox"/> Fridge <input type="checkbox"/> Motorcycle <input type="checkbox"/> Temp <input type="checkbox"/> Cart <input type="checkbox"/> Electricity <input type="checkbox"/> Television <input type="checkbox"/> Camera
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5. Intended Enrollment Information

Which grade will the applicant be in next year?	
Will the application attend the same school as last year?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, mention the school:

If No, list the school the applicant wants to attend below:

	Name of the School	Distance from home	Reason for attending this school (<i>currently enrolled, vicinity to home etc.</i>)
First choice			
Second choice (if any)			

Specify below stated fees for your first choice of school (*provide the best estimate if not available. If you overestimate, your application will be rejected.*)

Monthly fee (if any)	Rs.	Exam Fee (if any)	Rs.
Entrance form fee (if any)	Rs.	Admission fee (if any)	Rs.
Please mention any other anticipated expenses, if any	Rs.		
Specify the purpose for which this amount will be used (<i>Uniforms, Transportation etc.</i>). If possible, please provide detailed break-up of the anticipated expenses.			
TOTAL AMOUNT of financial assistance requested for the complete year (<i>This would be the sum of all the above</i>)	Rs.		

**If the amount requested is more than 7500 rupees:
As you know, CE does not provide more than Rs.
7500 per academic year. Please let us know how you
will fund the remaining amount?**

6. Applicant's Relation to CE

Is the applicant a relative of CE volunteer?

Yes No If Yes, state the relation:

7. Additional Information

8. Signature of Guardian

I declare that all information presented is true, correct and complete at this time and that I will send timely notice of any significant change in our family situation, in family income or assets as reported on this form or upon receipt of other scholarships or grants for the applicant. I further agree to provide, if requested, any other official documentation necessary to verify the information reported. I understand that the scholarship will be revoked if I have knowingly submitted false or fraudulent information on this application, or concealed financial and other information relevant to this application. I also understand that there is no guarantee of assistance or renewal of funding and all the decisions are made by NCEF on the best information NCEF has.

If the student receives financial support from NCEF/CE, I agree to authorize NCEF/CE to use information related to the children (photo, information about his/her student and school, etc.). My signature below signifies that I have no objection in NCEF/CE using that information for dissemination purposes through internet or other mediums.

(Signature of father, mother, or a legal guardian (in that order of preference) of the applicant)

8. Signature of Person Preparing the form

Date	
Name of the person preparing the form	
Address of the person preparing the form	
Relation to the applicant	
Signature of the person preparing the form	

Part 2: Information from the volunteer and coordinator

To be filled by the volunteer after Part 1 is completed. PLEASE make sure that the applicant or his/her family has no access to what you write here.

- 1. You have known the student and his/her family for some time now. Please let us know what you think about this student's financial and academic performance:**

Volunteer's comments (if the volunteer is not area coordinator, both should write their comments separately)

2. How long does it take for the Area coordinator (either from his home or office) to reach this student's house?
3. How long does it take for the volunteer (either from his home or office) to reach this student's house?
4. How many volunteers are there within 1-hour distance from this student's house?