

MALTA GOVERNMENT SCHOLARSHIP SCHEME



Ministry of Education,
Culture, Youth and Sports

POSTGRADUATE

Application Form
2009

INSTRUCTIONS

Before completing this form please read the regulations for the award you are applying.

Each candidate must complete this form (*either online, typewritten or written legibly in ink*).

Other documents to be submitted with the form are :

- i) Six certified copy of your University/College transcripts (detailed).
- ii) Six certified copy of the letter of acceptance from the University applied for.
- iii) One copy of Identity Card.

1. Surname	
2. Name	
3. Nationality	
4. I.D. Card No.	
5. Date & Place of Birth	
6. E-mail Address	
7. (a) Tel/Mobile No. - Malta (b) Tel/Mobile No. - Abroad (if applicable)	
8. Gender	

9. Home Address	

10. Address Abroad (if applicable)	

11. Details of certificates, degrees and professional qualifications acquired			
Name of Institution	Subject of Qualifications	Classification	Date
a)			
b)			
c)			
d)			

12. Occupation and previous appointments (if any)		
Name and address of employer	Present Post	Date of Employment
a)		
Name and address of employer	Previous Posts	Date of Employment
b)		
c)		
d)		

13. Courses undertaken locally and/or abroad additional to item 11.

Name of Institution	Awarding Body	Course	Dates	Certificates/ Diplomas Obtained
a)				
b)				
c)				
d)				

14. Course/s Applied for

a) Title of Course/s

b) Whether Full-time, Part-time or Distance Learning?

c) Level of Degree

Master's / Doctorate (*delete as appropriate*)

d) Area of Study

e) What are the required minimum qualifications to follow the course

f) Do you qualify?

g) Preference as to University you wish to study at in the awarding country.

1.

2.

3.

h) Do you have at least one conditional acceptance from a University of your choice?	<hr/> <hr/>
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15. Name of three referees (with their titles, degrees, etc.)	Address
	1. <hr/> <hr/> <hr/> <hr/>
	2. <hr/> <hr/> <hr/> <hr/>
	3. <hr/> <hr/> <hr/> <hr/>

