



# Financial Services Authority Professional Scholarship Application Form

Passport Photo

## Details of Applicant

1. Surname: .....

2. First Name(s): .....

3. Date of Birth (dd/mm/yyyy):

4. Nationality: .....

5. Gender: M  F

6. N.I.N:

7. Address: .....

8. Telephone Number: ..... 9. Email Address: .....

## Educational Record

10. Please state your highest academic qualification(s) and attach copies of certificates and transcripts

Name of Institution	Year	Course	Score

## Employment Record

11. Name of Organisation: .....

12. Post title: .....

13. Contact details of employer: .....

14. Summary of main responsibilities: .....

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### References

15. Please provide the contact details of your two referees:

Full name: .....

Post title: .....

Name of Organisation: .....

Address: .....

Telephone Number: .....

Full name: .....

Post title: .....

Name of Organisation: .....

Address: .....

Telephone Number: .....

### Personal Statement

16. Please describe why you have applied for the FSA Professional Scholarship Initiative, how this scholarship will help you achieve your personal goals, career aspirations and contribute to the Non-Bank Financial Services industry in Seychelles and why you wish to pursue this field of study. (Use additional page if required)

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**Declaration of Applicant**

I declare that the information I have provided on this application form is true and accurate to the best of my knowledge.

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Signature of Applicant

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Date of Signature

Documents to submit with your application:

- Passport photo
- Copy of National Identity Card
- Updated Curriculum Vitae
- Academic transcripts
- Endorsement letter from employer (if employed)