University *Sarajevo School of Science and Technology* (SSST)

Scholarship/Financial Aid Application Form
New Applicant

1. Personal Information:

PHOTO

Name:

Date and place of birth:

Home address:

Current address:

Contact Phone Number:

2. University SSST Faculty:

(please choose the program you are applying for)

☐ **COMPUTER SCIENCE AND INFORMATION SYSTEMS**

☐ **GAME DESIGN AND DEVELOPMENT**

☐ **ECONOMICS AND BUSINESS**

☐ **POLITICAL SCIENCE AND INTERNATIONAL RELATIONS**

☐ **SARAJEVO MEDICAL SCHOOL - Medicine** ☐ **Dentistry** ☐ **Pharmacy** ☐

☐ **SARAJEVO FILM ACADEMCY (SFA)**

☐ **FOREIGN LANGUAGES**

3. Candidate High school Record

(select the box corresponding to your academic performance)

☐ Valedictorian *(Best Student or 5.0 all 4 years)*

☐ GPA 4.5 and above *(during years 3 and 4)*

☐ GPA 4.0 and above *(during years 3 and 4)*

☐ GPA 5.0 in core subjects all 4 years *(subjects relevant to chosen program at SSST)*

☐ GPA below 4.0 *(during years 3 and 4)*

4. Candidate Extracurricular Record

(select the box if you have participated in any of the following)

☐ International / State Championships

☐ FBiH / Cantonal / Municipality Championships

☐ School Championships and Awards

☐ Club Activities / Volunteering, Sports / Music

**Please supply copies of any awards received together with your application*

5. Additional Financial Information

5.1 Socially Endangered Categories

(please specify if applicable, example - single parent, low income, disabilities, RVI, etc.)

5.2 Family Income

Parent/custodian Earnings: (A for employed in a company, B is self-employed)

☐ A.

Parent I

Company name:

Employer Contact (address, email, phone):

Duration of current employment:

Salary:

☐ *Parent II*

Company name:

Employer Contact (address, email, phone):

Duration of current employment:

Salary:

☐ B.

Parent I

Self-employed (Family owned business):

Company name:

Description of services:

Year of establishment:

Number of Employees:

Company ID Number (Poreska uprava):

☐ *Parent II*

Self-employed (Family owned business):

Company name:

Description of services:

Year of establishment:

Number of Employees:

Company ID Number (Poreska uprava):

5.3 List Any Additional Income and the Amount:

5.4 Number of Dependents in Family:

5.5. Do You Have Any Dependents:

(please specify relationship to them, example – children, siblings, parents etc)

5.6. Additional Circumstances affecting candidate's financial viability *(if applicable please list)*

(Examples: Medical issues in the family, remote living, etc.)

6. **As part of my scholarship obligations and my contribution to the University SSST development, for the upcoming academic year I am applying for the following voluntary position(s):**

- ☐ Student tutor
- ☐ Academic Writing Assistant
- ☐ Tutor for the preparatory classes
- ☐ SSST Library
- ☐ Student Newspaper "Independent"
- ☐ -Help with event organization (Open Day, Winter Academy, presentations, promotions…)
- ☐ Administrative work
- ☐ Practical work at the IT office or SSST development team
- ☐ SSST Restaurant
- ☐ Photography services
- ☐ Other (suggested by the Scholarship Committee)

**Student is obligated to contribute with up to 5 hours per week in the chosen activity, also approved by the Scholarship Committee, starting from the second semester of 1st year at SSST*

Mandatory documentation (IN ADDITION TO THE APPLICATION):

1. **Motivational Letter: in addition to your academic and professional achievements please tell us about any unusual or specific circumstances that affect your family's financial situation. (Written in English and up to 1 pg. long)**
2. **Mandatory supporting documentation: Official confirmation of income (given by the employer, if applicable), Official confirmation of unemployment, retirement check, official disability confirmation, official death certificate.**
   (Potvrda o visini primanja - izdata od strane firme uposlenog/e, uvjerenje Biroa za nezaposlene, penzioni ček, uvjerenje o invaliditetu- RVI ili dr, umrli list.)
3. **1 photo (standard format, 4x6 cm)**

Conditions:

1. Scholarships are awarded on a yearly basis (for the upcoming academic year)
2. Availability of scholarships depends on sufficient resources of the SSST Scholarship Fund.
3. Scholarships are awarded based on financial need and academic merit of applicants, assessed by the Scholarship Committee at the end of each academic year
4. If any of the information on the form is proven to be false, the scholarship will be revoked without possibility to re-apply.
5. **Incomplete application forms, without supporting mandatory documentation, will not be considered.**
6. Applicants are advised to bring additional documentation that can testify of their achievements in and outside of the classroom, or any additional recommendations that certify their academic abilities and dedication.
7. All the information submitted by the applicant will be kept confidential.

I certify that the statements and information herein are true, correct and complete to the best of my knowledge.

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Date and place Applicant's signature