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JUBILEE CHRISTIAN ACEDEMY PARENTS' AUXILIARY APPLICATION FOR FINANCIAL ASSISTANCE PROGRAM SY _____

A. STUDENT INFORMATION

English Name _____ Birthday _____ Level & Section _____ Other Scholarship Received ___ Chinese Name _____ Age ____ Conduct ____ General Average _____ 1 ¹/₂ x 1 ¹/₂ Photo

Reason for applying for JCAPA Scholarship _

B. PARENT / GUARDIAN INI	FORMATIO	N				
Person	Father / Guardian			Mother / Guardian		
Information						
English Name						
Resident Address						
Resident Contact Number						
Profession / Position						
Professional Address						
Professional Contact Number						
Annual Salary						
Other possible source of income	Specify		Amount	Spe	cify	Amount
* Interest from bank						
* Financial Aids from						
relatives or Organization						
C						
* Others						
Residence						
* Owned by you	Yes / No			Yes / No		
* Owned by your parents	Yes / No			Yes / No		
* Rented	Yes / No	Monthly Rental	:	Yes / No	Monthly Ren	tal:
* Free rental by relative/friend	Yes / No			Yes / No		
* Mortgage with a bank	Yes / No	Amortization/mo:		Yes / No	Amortization/mo:	
Transportation Vehicles		# of vehicles owned: Make:			# of vehicles owned:	
* Own Vehicle/s	Yes / No			Yes / No	Make:	
		Model:			Model:	
Name/s of Dependent/s	Birthdate		School	Level		

I hereby certify that the above information is true and accurate.

Father / Guardian / Date (Signature over printed name) Mother / Guardian / Date (Signature over printed name)

Note: Kindly attach all required documents. Please refer to guidelines of the JCAPA Scholarship Program. ALL INFORMATION HEREWITH SHALL BE TREATED CONFIDENTIALLY.

Received by:

Date

JCAPA Scholarship Committee

Receive Application No 20 _____ - ____ (To be filled by the receiving person at the JCA Admin Office)