



**APPLICATION FOR
SINGAPORE CHILDREN'S SOCIETY
RESEARCH GRANT**

Photograph

Personal Particulars

Name: (in block letters and underline surname)

Gender: Male / Female

Mr/Ms/Miss/Mrs/Mdm/Dr

Date of Birth: (DD/MM/YY)

Contact No.: (H)

(O)

(HP)

NRIC/Passport No.:

Nationality:

Country of Birth:

Residential Address:

Mailing Address: (if different from above)

Email Address:

Academic Qualifications and Relevant Experience

State your completed post-secondary education. Please attach certified true copies of the relevant certificates.

From	To	Institution	Qualifications Obtained (state year obtained)

Research Experience: (if any)

Present Place and Course of Study

Institution:

Course of Study:

Memberships and Awards/Scholarships Received

Are you a member of any academic or professional society:

No Yes, please specify: _____

Have you been awarded or are currently in receipt of any similar or equivalent scholarship, fellowship, award or grant?

If so, please state the name of the scholarship, fellowship, award or grant and duration. (attach documentary evidence)

No Yes, please specify: _____

Proposed Research

Title of Proposed Research Topic: (attach copy of detailed Research Proposal and estimated costs)

Significance and Aims of Research Project:

Type of Dissertation: (select one)

Honours Thesis

Masters Thesis

PhD Thesis

Others, please specify: _____

Duration of Study:

Expected Start Date: _____ (DD/MM/YY)

Expected End Date: _____ (DD/MM/YY)

Name of Research Supervisor:

Designation:

Contact No.:

Postal Address:

Email Address:

Declaration

Should my application be successful, I undertake not to accept grants/awards from other organisations if these will be used to defray expenses covered under a Singapore Children's Society Research Grant. I will withdraw my application from Singapore Children's Society should I accept such grants/awards from other organisations. I certify that all statements made by me on this form are correct. I understand that withholding information requested in this application or giving inaccurate or false information will render this application invalid.

Date: _____

Signature: _____

***Note:** Selection of successful applicants will be carried out by a panel. Kindly note that the decision by the panel is final. No subsequent changes or appeals by applicants will be entertained.

Please mail your application form together with educational certificates, transcripts of university exam results, research proposal, estimated cost of research project and a recent passport photograph to:

**Singapore Children's Society
Research & Outreach Centre
9 Bishan Place, #05-02 Junction 8
Singapore 579837**