

# APPLICATION FOR DGDC SCHOLARSHIP

Complete only if you apply for a DGDC (Directorate General of Development Cooperation)-scholarship. Please do not detach this page from the application form.

**NAME OF THE APPLICANT:** .....

## FAMILY DATA

<b>Spouse</b>	
Full name of spouse: .....	
Date of birth: .....	Place of birth: .....
Nationality of spouse:.....	Profession of spouse: .....
Date of marriage: .....	Country of marriage: .....
Permanent address (if possible also phone and/or fax number/e-mail): .....	
.....	
<b>Children</b>	
<b>Name of children</b>	<b>Place and date of birth</b>
1.....	.....
2.....	.....
3.....	.....
4.....	.....
5.....	.....
6.....	.....

- Are you employed in a project sponsored by the Belgian Government? Yes  No   
If yes, specify: .....
- Did you apply for a DGDC fellowship for the academic year 2009-2010 at another institution? Yes  No   
If yes, specify: .....
- Did you receive a DGDC fellowship in the past? Yes  No   
If yes, specify the academic year, period of the course, institution, name of the course and field of study:  
.....

### Notes :

- **Applicants should be aged under 45**
- **Only nationals of the following countries are eligible :** Algeria, Bangladesh, Benin, Bolivia, Brazil, Burkina Faso, Burundi, Cambodia, Cameroon, China, Colombia, R.D. Congo, Côte d'Ivoire, Cuba, Ethiopia, El Salvador, Ecuador, Guatemala, Guinea, Haiti, India, Indonesia, Kenya, Madagascar, Mali, Morocco, Mozambique, Nicaragua, Niger, Palestine, Peru, Philippines, Rwanda, Senegal, Suriname, Tanzania, Uganda, Vietnam, South Africa, Zambia, Zimbabwe
- In case you are granted a DGDC fellowship, do not leave your country without the following documents:
  - Marriage certificate
  - Birth certificate of each child.
  - These documents should be translated into English OR one of the national Belgian languages and legalised by the Belgian Embassy or Belgian Consulate.
- The Belgian Embassy or diplomatic representatives in your country can also request the following documents:
  - Certificate of moral probity
  - Medical certificate (in a sealed envelope)

<b>I certify that this information is correct and complete.</b>	
<b>I agree that any false statement may result in the immediate cancellation of my scholarship</b>	
Date	Applicant's signatur