

Markou Drakou 8, CY1700, P.O. BOX 24005, Nicosia, Cyprus Tel: +35722842500 Fax: +35722842555

Email: info@cyma.ac.cy Website: cyma.ac.cy

## APPLICATION FOR PARTICIPATION TO THE CADET SCHOLARSHIP PROGRAM

| PART A: GENERAL INF   | ORMATION (To be compl                     | eted by all applicants)                        |                     |  |
|---|---|--|---------------------|--|
| 1. Full Name:   |   |  |                     |  |
| 2. Home Address:  |   |  |                     |  |
|   | 12.11                                     | D (D)   D                                      | V.                  |  |
| 3. Tel.:  | ID Number:                                |  | M: Y:               |  |
| 4. (a) Highschool/Technical Sc  | :hool                                     | (b) Leaving Certificate Fin                    | al Grade*:          |  |
| *Attach the Highschool/Technic  | cal School Leaving Certificate (or equiva | alent) with a minimum final Grade 15/20 or 75/ | 100.                |  |
| 5. Evidence of English Langua   | ge Proficiency according to CyMA's        | s Admissions Criteria (Attach the relevant     | certificate)        |  |
| 6. Medical Fitness Certificate f  | or Service at Sea according to CyN        | 1A's Admissions Criteria (Attach the relev     | ant certificate)    |  |
| 7. Clear Criminal Record according to CyMA's Admissions Criteria (Attach the relevant certificate)  |   |  |                     |  |
| 8. Is there another member of your family who is also a cadet at the Cyprus Maritime Academy?   |   |  |                     |  |
| If YES, please state his/her name and cadet number:   |   |  |                     |  |
|   |   |  |                     |  |
| PART B: SOCIO-ECONO   | MIC INFORMATION (To b                     | e completed by all applicants                  | )                   |  |
| 9. Family Status:   |   |  |                     |  |
| -   |   | -1-11-1  |                     |  |
| <ul> <li>State your dependent family members who are under 18 years old or over 18 years old assuming they are pupils, cadets or<br/>currently serving the in military or are permanently incapacitated (Attach all certificates including birth certificates)</li> </ul> |   |  |                     |  |
|   |   |  |                     |  |
|   |   |  |                     |  |
| b. Do you come from a large fa  | amily (4 children or more)? IF YES, a     | attach the Large Family certificate/ID)        |                     |  |
|   |   |  |                     |  |
| c. Do you belong to a divorced  | or single-parent family? If YES, att      | ach a copy of the divorce decree and agr       | reed alimony amount |  |
|   |   |  |                     |  |
|   |   |  |                     |  |

| 10. Financial Situation of the Family. The combined annual Family Income must not exceed €60,000/Annum (Attach certificates of annual insurable earnings of the previous year from the Department of Social Insurance)   |   |  |  |  |
|--|---|--|--|--|
| a. Father's occupation and annual income:  |   |  |  |  |
| b. Mother's occupation and annual income:  |   |  |  |  |
| c. Annual income from dependent family mem   | pers  |  |  |  |
| d. The cadet/applicant comes from another city and rents an apartment in Nicosia? If YES, attach a rental contract.  Rent Amount:  |   |  |  |  |
| 11. The cadet/applicant has a serious health/dis   | ability problem? If YES, state the health problem/disability (Attach medical certificate) |  |  |  |
| 12. Do parents have a serious health problem/disability? Attach a pension receipt certificate for incapacity of the previous year from the Social Insurance Services (minimum percentage disability 75%) or certificate of disability pension (minimum disability 60%)   |   |  |  |  |
| Father:  | Mother:   |  |  |  |
| 13. Do you belong to a refugee family? If YES, attach the Refugee ID   |   |  |  |  |
| PART C: TERMS & CONDITIONS   |   |  |  |  |
| <ul> <li>a. Scholarship applications by new prospective eligible Cadets will need to be submitted through the Admissions Office of<br/>Intercollege &amp; the CyMA by 01/09/2024.</li> </ul>   |   |  |  |  |
| b. All Scholarship Applications will be reviewed, evaluated and granted by a Scholarship Board until the 20/09/2024 or until all available scholarship funds have been distributed.  |   |  |  |  |
| c. The scholarship funds will be distributed equally over the 4 years of study while all scholarships to be granted will be conditional and will be reviewed and renewed annually, based on the individual Cadet's overall performance during the previous academic year. The evaluation of each Cadet will be performed by CyMA and the corresponding company and will be based on: |   |  |  |  |
| <ul> <li>Academic Performance: Cadets must successfully complete all courses with a minimum combined average CPA of<br/>2.50/4.00 for the academic year when the scholarship is granted under the CSP.</li> </ul>  |   |  |  |  |
| <ul> <li>Practical Performance: Cadets are required to achieve a positive feedback during all practical trainings and onboard<br/>periods of sea-service.</li> </ul>   |   |  |  |  |
| d. The Cadets benefitting from the CSP will be expected to complete their 12-month practical training primarily onboard vessels of the specific shipping company providing their scholarship (unless agreed otherwise), thereby leading to their potential employment upon graduation.   |   |  |  |  |
| e. If a Cadet fails to meet the above requirements in a given academic year, then they may be liable to forego their eligibility to receive the scholarship awarded under the CSP for the following year.  |   |  |  |  |
| PART D: APPLICANT'S DECLARATION OF RESPONSIBILITY  |   |  |  |  |
| I hereby confirm that the information provided above is true and accurate. I have carefully read Part C and accept the relevant terms and conditions stated therein.   |   |  |  |  |
| Applicants Signature:  | Date:   |  |  |  |
| FOR INTERNAL USE ONLY  |   |  |  |  |
| Successful Completion of a Personal Interview with the Academy  The application is Approved YES NO   |   |  |  |  |
| YES NO   | The Scholarship is valid for the Academic Year  |  |  |  |
| Remarks:   |   |  |  |  |
| Director's Full Name:  | Director's Signature: Date:   |  |  |  |