CHETTIARS' TEMPLE SOCIETY 15 TANK ROAD, SINGAPORE 238065; Tel: 6737 9393; Fax: 6735 0804 CTS EDUCATION AWARDS 2026

APPLICATION CHECKLIST FORM

[Closing date: 30 November 2025]

4 ADDI ICANTIC	DARTICIU ARC			
A. APPLICANT'S				
Applicant's Full Nam	ne (as in B.C./NRIC):			
Category / Level:				
Scholarship / Bursary	* Application			
*Delete as appropriate	2			
B. FAMILY MEMI	BERS PARTICULARS	(only for Bursary App	licants)	
Name of Family Member:	Relationship to Applicant:	Age of Family Member:	Occupation:	Net Salary (monthly):
*Delete as appropriate	2			
C. DOCUMENTS (CHECKLIST (Please ti	ck accordingly)		
	of Applicant's Birth Cer		and Back) ¹	
	ination Result Slip ²	1.2110 (1.0111)		
		IC (Fuent and Davil) - F	Call family manh and	on brancom, on b
	of Birth Certificate / NR			
□ Payslip / CP	F Contribution Stateme	nt (Last 3 Months) of a	ll family members <u>(for</u>	bursary only)

 $^{^{\}rm 1}$ Permanent Residents need to submit documentation proof of their PR Status

 $^{^2}$ ITE, Polytechnic and University – Latest CAP / GPA Score; All other levels – Authorized Result Slip (as of 2025)

D. DECLARATION BY PARENT / GUARDIAN / APPLICANT (ABOVE 18 YEARS OLD)					
I declare that to the best of my knowledge, the information given above is true and correct. I understand that my application will be rejected if information given by me is false or incomplete.					
Name & Signature of parent / guardian / applica	unt*	Date			
Name & Signature of parent/ guardian/ applied	Date				
*Delete as appropriate					
E. FOR OFFICIAL USE ONLY					
Approved / Not Approved*					
□ Scholarship Award					
□ Bursary Award					
□ Tamil Language Award	d				
Signature of Chairman Sig	nature of Secretary Sig	nature of Member			