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|  | **T.C.**  **KİLİS 7 ARALIK UNIVERSITY**  **FACULTY OF ECONOMICS AND ADMINISTRATIVE SCIENCES**  **Student Accommodation, Meal etc. Scholarship Application Form** |  |



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| **SEMESTER** | 20 …- 20 … (…) FALL (…) SPRING (…) SUMMER | | | | **APPLICATION DATE:** … /… ./ 20… | | |
| **STUDENT NO.** |  | **NAME AND SURNAME** | | |  | | |
| **NATIONAL ID NO.** |  | **CLASS** | | |  | | |
| **DEPARTMENT AND PROGRAMME** | **( ) UNDERGRADUATE** | | | | **( ) MASTER** | | **( ) PhD** |
| **( ) Business Administration (Daytime Education)** | | **( ) Economics (Daytime Education)** | | **( ) Business Administration** | | **( ) Business Administration** |
| **( ) Business Administration (Evening Education)** | | **( ) Economics (Evening Education)** | | **( ) Economics** | | **( )…………** |
| **( ) Political Science And Public Administration (Daytime Education)** | | **( ) International trade and logistics (Daytime Education)** | | **( )** | | **( )…………** |
| **( ) Political Science And Public Administration (Evening Education)** | | **( ) International trade and logistics (Evening Education)** | |  | |  |
| **APPLICATION TYPE** | **( ) Accommodation** | | | **( ) Meal** | | **( ) Others …………………………..** | |
| **STATUS STATEMENT DOCUMENTS** | **( ) Number of (Employee) People Who Bring Income to the Family Budget in the House: ………**  **( ) Father Working / Profession (………………………………………………………)**  **( ) Mother Working / Profession (…………………………) My Brother / Brother Is Working (……………….……………)**  **( ) Family Monthly Income Amount: ……………….TL**  **( ) Total Number of Siblings ………………………… Number of children at college/university………………………**  **( ) Number of People The Family of the Student is Obliged to Care for: ……………………………….**  **Is Mother Alive ( ) Yes ( ) No**  **Is Father Alive ( ) Yes ( ) No**  **( ) Transcript of 2-3-4 Grade Students**  **( ) Other Scholarships and Loans Received by the Student**  **( ) Location During Education : ( ) KYK Dormitory ( ) Studio Apartment ( ) Rented Flat ( ) Private Dormitory**  **( ) Our Own House**  **( ) Student's Phone Number : ………………………………………………………………….**  **( ) Relative of a Martyrdom/Veteran……………………………………………………………….** | | | | | | |
| **STUDENT’S SIGNATURE** |  | | | | | | |

Grading: