

Attention: This application is in a fillable PDF format. Please type in your information.

Financial Information

Personal Information

LAST (FAMILY) NAME FIRST NAME DATE OF BIRTH (MM/DD/YYYY)

List of Family Members

In the table below, please provide information on each family member living in the same property address as the applicant and his/her contribution to the family’s household monthly income. The list should include family members who are temporarily away from home but contribute to or depend on the household income, e.g. applicants’ siblings who are university students, a parent who is a migrant worker etc. If your parent/guardian is unemployed, please provide a document verifying his/her status.

#	LAST NAME, FIRST NAME	RELATIONSHIP TO APPLICANT/AGE	CURRENT PROFESSION/OCCUPATION	TYPE OF INCOME (SALARY, PENSION, ALIMONY, DISABILITY PAYMENT, ETC.)	MONTHLY CONTRIBUTION
1	<i>E.g. Tursunova, Kadisha</i>	<i>Mother-53</i>	<i>Teacher</i>	<i>Salary</i>	<i>125800 tenge</i>
2					
3					
4					
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11					
12					
10					
11					
12					

PLEASE NOTE: U.S.-CAEF reserves the right to verify the financial information provided in this application. Applicants who provide false or misleading information will be disqualified. In addition, American Councils conducts periodic inquiries into Fellows’ financial status once they are on program to verify the information reported in this application. If American Councils learns that a U.S.-CAEF Fellow has provided false information in his/her application, the Fellowship will be terminated immediately.

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Financial Aid Statement (max. 500 words)

Scholarships will be awarded to those candidates with clear and demonstrable financial need. Please describe your current financial status to support the information you have provided in the section "Financial Information". Please explain why you believe you financially qualify for an Enterprise Student Fellowship.