



THUMBAY GROUP SCHOLARSHIP APPLICATION FORM

First Name: Last Name:

Address:

City/Town: Postal Code: Tel:

Mobile: Email:

Present level of education:

Program you plan to take: BPT PharmD

Have you already been accepted or interviewed? Yes No

If No, please elaborate:

Have you or will you be receiving additional funding for this program? Yes No

If YES, please elaborate:

ELIGIBILITY QUESTIONS

Respond to the following questions using 12 pt. font and a maximum of three 8.5x11" pages.

Responses must be typed and attached to the application form

The Thumbay Group Scholarship will be awarded based on initiatives/ activities, financial need, extra curricular activities and academic average

1. *Why would you be a worthy recipient for the Thumbay Group Scholarship?*
2. *What extracurricular activities have you been involved in? Please include any worthwhile activities or initiatives.*
3. *What are your academic and career objectives?*
4. *Explain how financial support would be helpful to you.*

- Please include the most recent record of your grade 12 marks

- Please include funding resources for other expenses incurred

Please send completed applications to: Director, Corporate Scholarship Scheme

THUMBAY GROUP

P. O. Box 4184, Ajman - UAE

Email: info@thumbay.com