SCHOLARSHIP APPLICATION FORM

Master in International Dispute Settlement • Graduate Institute of International and Development Studies and Geneva Law Faculty Villa Moynier | 120b, rue de Lausanne
P.O.Box 1063 | CH-1211 Geneva 1
Switzerland

The MIDS offers a limited number of scholarships each year. The number and amount of the scholarships may vary from one year to another.

In order to submit your request for a scholarship through the MIDS, please submit a complete file to info@mids.ch.

Requested documents:

- 1. Scholarship application form;
- 2. Personal statement (3'500 characters maximum) demonstrating the applicant's need in getting a partial or full scholarship;
- 3. Copies of official statements of income (your own and/or any other relevant persons, family members or other, whom you might call upon for financial support);
- 4. Official statement from a bank or other saving institutions, and/or tax forms, indicating available funds and assets:
- 5. Name of the scholarships or fundings (e.g. loan request, including from your employer) you have applied to and copies of the responses to your request, if already received).

A selection of scholarship applications will be forwarded to sponsors by priority of their admission ratings. The final decision on the scholarship award will be notified by the MIDS by 20 March.

Most sponsors have strict eligibility criteria. The MIDS thus requires certain key information in order to submit dossiers to them for scholarships. In view of this, the MIDS may contact you later on to request further information or documents.

All financial information should be provided converted into Swiss Francs (CHF)

1. APPLICANT							
Name of applican	· ·		/	/			
Name of applicant :		Family Name(s)	Fir	st name(s)	Middle name		
Citizenship: Date of bi		irth:					
2. EDUCATIO	ON						
1. Previous edu	ıcation						
_		_		alent and the other m	ost recent university degree		
you have rece	eived (or ar	e currently pursuing), if any.				
		Degree and					
Name of Instit	tution	date awarded	Annual cost (CH	(F) How fir	nanced Field of study		
II much fi	المنم المنام المنام	'C	. 1 mont man	· · · · · · · · · · · · · · · · · · ·	d		
			ive during your most rece	ent year in school: w	as the aid a loan or a		
scholarship?	Please des	cribe:					
3. FINANCIA	L INFO	RMATION					
1 A 16 aam 4 da	4 . 21						
1. Applicant de	etans						
Are you curr	ently emp	loyed?:	Employer:				
Your current	position/t	itle:		Since:			
Your monthl	y net inco	me:	Your net earnings in t	he last 12 months:			
2 Applicant in	2. Applicant income and wealth						
2. Applicant in		al gross income in		<u> </u>			
	1	CHF	Gross wealth in CHF	Nature of employm	nent / employer (name/address)		
Spouse							
Mother							
Father							

Foster/Step Family
Other (person you live with, guarantor)

Surname and first name(s)	Date of birth	School / Class	Home address

4. Please complete the following for all of the applicant's brothers and sisters:

Age	Occupation	Country of residence	Live at home	In school?	Annual cost of school	Amount financed by parents
			Yes No	Yes No	CHF	CHF
			Yes No	Yes No	CHF	CHF
			Yes No	Yes No	CHF	CHF

5.	How many persons, in addition to the applicant and those listed in item 3, are dependent on the family's income?
	Relationship:

6. In the last 12 months, how much of your household income (before taxes/expenses) came from the following sources)

Father's income	Family business	Allowances/subsidies	
Mother's income	Family real state	Income of other household members	
Your income	Pensions/annuities	Other:	
Your spouse's income	Interest/dividends	Other:	

7. Please check the type of documentation you will be sending in order to verify income information requested in this form

Tax forms
Statement from employer (salary slip, contract)
Bank statement
Other:

8.	Should there be	an increase or	a decrease in	vour household i	ncome next year.	please explain:

9. From which of the following sources do you expect to receive support for your educational expenses (tuition and living expenses) in 2019-2020, and in which amount (CHF):

Your income	Family income	Government	
Your assets & savings	Family assets & savings	Agencies/foundations	
Relatives/friends	Current employer	Other	

Organization	Application date	Award notification date	Amount expected (CHF)
	<u> </u>		
5. MOTIVATION LET	FER (3,500 characters maximum	m)	
6. APPLICANT'S DECI	LARATION		
T			11 6.1 11
	s made above are accurate (any f		
	he Geneva Master in Internation ary verifications to examine my		
administrations the necess	ary verifications to examine my	situation with regard to meonic a	ara stadios.
I agree to provide the Gen	eva Master in International Disp	ute Settlement with an official co	ppy of my income tax returns
	rification of the above information		

4. REQUEST FOR FINANCIAL ASSISTANCE

Date _____

Signature _____