



**Atok İlhan Scholarship for Supporting Gastronomy Education's Application Form**  
(FORM\_UBYO\_01\_001)

STUDENT INFORMATION	
Student No.:	
Name and Surname:	
Program and year of study:	
Mobile Number:	
E-mail:	

SCHOLARSHIP REQUEST		
Requested Semester		
Requested Scholarship Amount		
Type of Scholarship	<input type="checkbox"/> Tuition fee <input type="checkbox"/> Cash Stipends (1,500 TL) (Please open an account at the Özyeğin University Branch of Fibabanka and provide your IBAN details): .....	
Total ECTS credits completed successfully		
Registration Status	<input type="checkbox"/> Registered <input type="checkbox"/> Unregistered	<input type="checkbox"/> On Leave of Absence <input type="checkbox"/> Other
Have you ever been subject to any disciplinary punishment before?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Your CGPA	/ 4.00	

SCHOLARSHIP AND FINANCIAL SUPPORT RECEIVED FROM OTHER INSTITUTIONS			
Name of Institution	Scope and Term of Scholarship	Refundable/ Non-Refundable	Pending / Awarded

SCHOLARSHIP RECEIVED FROM ÖZÜ	
Type of Scholarship	Scope and Term of Scholarship
Housing Scholarship	
Dining Scholarship	
Book Scholarship	
Cash Stipend	
Have you ever been awarded any need-based scholarship before?	
Do you currently receive any need-based scholarship(s)?	
Have you ever been awarded the AİGEK Scholarship before?	
Do you currently receive the AİGEK Scholarship?	

WORK INFORMATION	
<b>If you have worked part-time at ÖzÜ:</b> <b>Department name,</b> <b>Working hours and period,</b> <b>Manager's details,</b> <b>Monthly Pay?</b>	
<b>If you work at another institution/organization, the name of your employer and your monthly pay:</b>	

FAMILY INFORMATION		
<input type="checkbox"/> Parents both alive and still together	<input type="checkbox"/> Mother alive, father deceased	<input type="checkbox"/> Parents both deceased
<input type="checkbox"/> Parents both alive but no longer together	<input type="checkbox"/> Father alive, mother deceased	<input type="checkbox"/> Other

<b>Mother's Educational Background:</b>	Illiterate <input type="checkbox"/> Primary Education <input type="checkbox"/> High School <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/>
<b>Father's Educational Background:</b>	Illiterate <input type="checkbox"/> Primary Education <input type="checkbox"/> High School <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/>

	Occupation	Employer's Name	Title	City	Telephone
<b>Mother:</b>					
<b>Father:</b>					

Number/Current Status of Siblings:	Number of	Name of School/Institution
Preschooler:		
Primary School Student:		
High School Student:		
University Student (excluding open education):		
At home, unemployed:		
At home, employed:		
Sponsors and Amounts of Siblings' Scholarship:		

Where do you reside in Istanbul?	Location	Monthly rent
With family		
With a relative		
In ÖzÜ dormitories		
In a private dormitory		
In a rented flat/house		
Other		

FAMILY INCOME/DEBT INFORMATION		
<b>Your Family Residence</b> (Rented, staff housing, family-owned etc.)	<b>City/District</b>	<b>If rented or staff housing, monthly rent (TL)</b>

Other real estate(s) under the sole or co-ownership of you or your family (House, Building, Land, Farm etc.)	City/District



AIGEK scholars are selected by the evaluation carried out by the Executive Board of the School of Applied Sciences. Any information provided in scholarship applications will remain confidential. Applicants must provide complete and true information on their application forms and in their application files. Failure to do so will result in initiation of a disciplinary investigation against the student as per the Rules and Regulations for Student Discipline of the Council of Higher Education. If found guilty as charged, the student will be subject to disciplinary action, and any disciplinary action taken as such will be recorded in the student's file. Where necessary, applicants may be asked to provide additional documentation to prove their financial need or verify information they have provided.

**Student's Name and Surname** :

**Student's Signature** :

*I hereby confirm that the information I have provided is true. I further accept and acknowledge that should otherwise be proven upon investigations, I will assume full responsibility of any legal or disciplinary actions and any consequences thereof.*

**Date** : ..... / ..... / 20 .....