

Jardine Foundation Application for Postgraduate Scholarship Award 2025

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own on your passport

Surname / Family Name		
First / Given Name(s)		(as shown on your passport)
Male Female Age	Date of Birth (d	d/mm/yyyy)
Place of Birth	Nationality	
Country of permanent residence		
E-mail	Tel. No	Mobile No
Home Address (Permanent)		
		Postal code
I have lived at this address since		
Home Address (Overseas, if applicable		
	Valid date of ad	ldress (dd/mm/yyyy)
MARRIED/SINGLE (please delete as app	ropriate)	
If Married: (a) state number () and ag	ges of children (if any	·)
(b) will your spouse accompa	any you to the UK?	Yes No
University Application Number		_ <u>_</u>
Do you have relations with other candid	lates, current or pas	t Jardine Scholars?
Yes, state Scholars's name		No
Have you applied or do you intent to ap	oply for any other se	cholarship?
Yes, state		_
Degree Course Name		Department
Start date of the Course:		
End date of the Course:		
Expected Annual Cost of the Course: £		
Course Fees: £		
Maintenance: £		
Total : £		

Name of University and College:				
University of Oxford	University	of Cambridge		
☐ Exeter College ☐ Oriel College ☐ The Queen's College ☐ Trinity College ☐ * Others	☐ Downing ☐ Magdale ☐ Peterhoo ☐ Trinity C ☐ * Others	College		
* Scholarships are only tenable at the above preferred Jardines' Colleges. Applicants who have applied to other Colleges will also be considered but successful candidates will be required to transfer to one of the preferred Colleges.				
Please provide a brief title and summary of the research proposal (if applicable, in not more than 350 words) and reasons for applying for the course*:				
* Plance write on a concrete cheat should you require				
* Please write on a separate sheet should you require more space. Please list the name and location of the universities you have attended up to date, and the degrees and results you have received:				
Name and Location of University	Years attended (MM/YY)	Degree obtained	Grade obtained	
Please list the name and location of secondary schools you have attended:				
Name and Location of School			Years attended (MM/YY)	

Professional experience – list your two most significant recent positions of full-time employment*:

	Organisation, Country	Position	Time frame (MM/YY)	
1				
Maiı	n responsibilities:			
2				
Maiı	n responsibilities:			
* Plea	ase use continuation sheets if insufficient space.			
Form of Consent to (a) the Jardine Foundation and (b) the University of Cambridge / the University of Oxford pursuant to the UK				
Data Protection Act				
In connection with my application for a Jardine Foundation Scholarship, I acknowledge that: (i) the Jardine Foundation will process the personal data contained in this application and any related papers for the purpose of my				
(1) [[ie Jarume Foundation wiii process the personal (uata contained in this application and any fela	ted papers for the purpose of my	

- the Jardine Foundation will process the personal data contained in this application and any related papers for the purpose of my application;
- (ii) the Jardine Foundation may pass my details and any other personal data on to the College at Oxford or Cambridge to which I have applied (the 'relevant College'); and
- (iii) the relevant College may provide the Jardine Foundation with all and any such personal information, including the status of my application, as the Jardine Foundation may request for the consideration of my application for a scholarship. I further acknowledge that the relevant College may, if they deem it necessary, contact me to seek a supplementary consent under the UK Data Protection Act.

In the event your application for a scholarship is successful, the Jardine Foundation will process information about you in order to manage the scholarship scheme, your participation in it and receive updates from your College on your attendance and progress. In addition, the Jardine Foundation may share some of your information with other Jardine Scholars and within the Jardine Matheson Group Companies in order to further relationships and networking between the Scholars and provide you with opportunities to further your academic and professional development.

Full terms and conditions of the Scholarships and more details about how we handle your information, are set out on the Foundation's website — www.jardine-foundation.org.

Applicant's Signature	Date	

Please answer the following questions in not more than 200 words for each question:

- 1. Describe, as precisely as possible, your professional objectives after completion of your course, how the course you have chosen would help you attain these objectives and what position you would like to occupy in ten years' time.
- 2. Describe what the word 'leadership' means to you and outline an achievement or experience that you believe best reflects your leadership potential.
- 3. Describe areas of community involvement that you have been, or still are, active in.

Note:

- 1. Applicants must fill in the application form and submit it together with the following:
 - (i) CV / Résumé;
 - (ii) a recent passport-size photograph;
 - (iii) a copy of a completed Cambridge/Oxford application;
 - (iv) certified copies of all relevant academic qualifications; and
 - (v) reference letter.
- 2. Application forms must be submitted to the Graduate Admissions Tutor of one of the preferred Colleges that have agreed to accept the applicant.

November 2025