

6. Occupation	7. Unemployed <input type="checkbox"/>	6. Occupation	7. Unemployed <input type="checkbox"/>
8. Name and Address of Employer		8. Name and Address of Employer	

PART 3. STUDENT'S DECLARATION

I declare that the information provided in this application is true and complete to the best of my knowledge. I understand that false information may lead to disqualification or withdrawal from the SONSOL Project. If selected, I agree to abide by the Project's terms and conditions.

Applicants' Name

Applicants' Signature

Date

.....

.....

.....

PART 4. NAME AND ADDRESS OF REFEREE

Please provide details of one referee. He/she **MUST** be a Senior Member of the **University**.

REFEREE			
Name		Position	
Address		Date	

Signature & Stamp

.....

Follow the link to register online before submitting this application form.

<https://bit.ly/SonsolProject25>

Alternatively, you can scan the QR Code to register.

