Application of SCAC Pastor's Children Education Fund

Name	of Applicant:								
Bank	name & Acc. No:			Email:					
District:NRIC No:									
Telep	hone: (O)		(HP)						
No	Name of Children	NRIC	School	Grade	Indicate the starting year & month *	Indicate Graduat on *			
*For o	children who are go	ing to or graduatin	g from degree or	diploma.					
Notes	::								
1.	Application is onl	y open to Itinerant	Ministry's' pasto	rs whose chil	dren are study	ing in			
	• •	dary school or univ			•	_			
2.	If approved, the amount given is:								
	Primary-RM300.00 per year;								
	Secondary-RM350.00 per year;								
	University-RM400	0.00 per year.							
	Applications must reach BOM before March each year.								
4.	Application forms to be submitted to: The Treasurer, Board of Ministry, fax to 084-313470, or email to scacbom@gmail.com.								
	The Treasurer, Bo	oard of Ministry, fax	k to 084-313470, (or email to so	acbom@gmail	.com.			
	Applicant's signat	ure:		Date:					
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	Treasurer of BOM (signature):			Date:					