

HMC Projects financial declaration form

Confidential



Name: (taken from your passport): _____

 First name Middle name Family name

Family information:

Check all that apply (with an x):

- | | | |
|--|---|--|
| <input type="checkbox"/> Parents together | <input type="checkbox"/> Parents divorced | <input type="checkbox"/> Father deceased |
| <input type="checkbox"/> Parents separated | <input type="checkbox"/> Single parent | <input type="checkbox"/> Mother deceased |

Check for all persons whose financial information is entered on this form:

- | | | |
|---------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Father | <input type="checkbox"/> Stepfather | <input type="checkbox"/> Male guardian |
| <input type="checkbox"/> Mother | <input type="checkbox"/> Stepmother | <input type="checkbox"/> Female guardian |

How many children, including the student applicant, are receiving financial support from you this year? _____

What currency do you use? _____ Please complete using your own currency

Parents' annual income and expenses (1st January – 31st December 2016)

Gross salaries and wages: father, stepfather, male guardian	per annum	
Gross salaries and wages: mother, stepmother, female guardian	per annum	
Any other additional annual income	per annum	
Total taxes deducted from annual gross income	per annum	

Please note that the word "GROSS" means the total salary or wage for the year (12 months) before any tax is deducted.

Parents' Financial Assets (1st January – 31st December 2016)

Bank accounts and Savings accounts _____
 Value of Other investments (e.g. stocks & shares, family owned business) _____

Parents' Financial Liabilities (1st January – 31st December 2016)

Total amount of debt to be paid during 2016 in fixed monthly repayments _____

	Year of purchase	Purchase price	Present market value	Unpaid mortgage
Home (if owned):	£	£	£	£
Other property: including land, dwellings and business property.	£	£	£	£

Declaration and authorisation:

We declare that the information reported on this form, to the best of our knowledge and belief, is true, correct and complete. HMC Projects has our permission to verify the information reported. **Schools reserve the right to withdraw any scholarship awarded if false information has been given.**

Signatures:

Male parent of guardian
Female parent or guardian
Date

Please give details overleaf of any other financial circumstances or factors which you wish to be taken into consideration in the assessment of this declaration