OVERSEAS PROGRAMMES CLAIM APPLICATION FORM

In the application or offer process, recipients are aware that NTU Personal Data Privacy Statement And Consent for Students ("Privacy Statement") in particular:

- paragraph (e): We are allowed to collect, use, disclose and/or process the student’s personal data for the following purpose:
  - facilitating, administering, processing dealing with and/or managing your application(s) for awards, scholarships (whether such award or scholarship is provided by any third party or NTU) and/or financial aid/loans, grants or bursaries, and if successful, administering and/or managing your awards, scholarships and/or financial aid/loans, grants or bursaries;
- paragraph 8(b), the third parties include:
  - individuals, organisations and/or any government authority who have provided you with scholarships, financial aids, awards, medals or prizes, or loans during the period (or part thereof) of your studies in NTU and who request for information relating to your progress and results as a student in NTU

Instructions

1. Please provide the following information.

<table>
<thead>
<tr>
<th>Name of Overseas Host Company / Institution:</th>
<th>NRIC:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date and duration of Overseas Programme:</td>
<td></td>
</tr>
<tr>
<td>Country of Programme:</td>
<td></td>
</tr>
<tr>
<td>Objective of Programme:</td>
<td></td>
</tr>
<tr>
<td>Amount to be Claimed for Cost of Living Allowance:</td>
<td></td>
</tr>
<tr>
<td>Amount to be Claimed for Cost of Economy-class Return Airfare (on the most direct route)</td>
<td></td>
</tr>
<tr>
<td>Total Cost to be Reimbursed:</td>
<td></td>
</tr>
</tbody>
</table>

2. Please submit the following supporting documents along with this claim application form:
   - Invoice for the return economy class airfare (if you are claiming for the Airfare Allowance).

Terms and Conditions

1. Students who intend to claim the Cost of Living Allowance and/or the Airfare Allowance must have obtained their institution’s approval of the overseas exposure programmes.
2. Students must submit this Overseas Internship Claim Application Form and the supporting documents to their respective Institution within three (3) calendar months of the completion of the internships.
3. Students must complete all overseas internship and submit all Overseas Internship Claim Application Forms and the requisite supporting documents to their Institution at least one (1) calendar month before their graduation from the Institution.
4. IMDA may reject any late or incomplete claim applications or claim applications which are not accompanied by the complete set of supporting documents.
5. If a claim is successful, IMDA will reimburse the amount to the Student through his Institution. The Institution will ultimately be responsible for the disbursement of the monies.

6. The disbursement of any funding support under the iPREP Programme shall be sole responsibility of the Institution in which each Student is enrolled.

7. IMDA shall not be liable to any Student for any losses or damages, loss of income, profit or savings or any indirect, incidental, special, consequential, or punitive damages arising from or in connection with any aspect of the iPREP Programme.

Declaration

1. I declare that I have read through and hereby accept all of the terms and conditions set out in this form and the Industry Preparation for Pre-graduates (iPREP) Programme Handbook.

2. I declare that the facts stated in this form and all accompanying documents are true. I understand that if either IMDA or the Institution in which I am enrolled has reason to believe that this form and the accompanying documents contain inaccurate, erroneous, false or misleading statements, the funding support offered under the iPREP Programme may be withdrawn and the abovementioned Institution may recover immediately from myself any part of the funding support that may already have been disbursed together with the applicable interest on the disbursed amount.

____________________________     _____________
Signature of Student                          Date

Acknowledged By:

____________________________     _____________
Signature of Coordinator                            Date

____________________________
Name of Coordinator

____________________________      _____________
Name of Coordinator                                                                                    School Stamp