

GUIDELINES FOR **THE SIAPR-ATE (ACCESS TO EDUCATION) GRANT REQUEST**

As of July 18, 2024

OBJECTIVE:

To help clubs jump start or reinforce their ATE (*Access to Education*) initiatives.

SCOPE:

Application for financial grant is open to all clubs under SIAPR (*Soroptimist International of the Americas Philippines Region (A Foundation), Inc.*).

POLICY:

1. The application for financial grant is limited to the following ATE initiatives:
 - Allowance for a Collegiate Level Academic Scholar
 - Allowance for a TVET (*Technical Vocational Education and Training*) Scholar
 - Financial Assistance (*via enrollment*) for a Review Class/Program in preparation for the Board/Bar Exam under the Educational Booster initiative.
2. Scholarship recipient must not have other scholarship grants from other organizations.
3. Application must be limited to two (2) individuals per club regardless of the initiative.
4. Club is required to submit a mid-year progress report (*for college scholars*) and year-end or end-of-program report (*for college/TVET scholars and booster recipients*). Each report shall be accomplished using the appropriate **SIAPR-ATE UPDATE ON FINANCIAL GRANTEE FORM** and must be accompanied with pertinent documents mentioned in the said form.

GUIDELINES :

Beginning SY 2025-2026, availability of grants are as follows :

1. The allowance for the Collegiate Level Academic Scholarship grant is for a maximum of one (1) year at ₱2,000 per month for 10 months. The total maximum amount available for one (1) recipient is ₱20,000 for one school/academic year. The first ₱10,000 will be given upon approval of grant, and the next ₱10,000 will be given as soon as a mid-year update report has been submitted.
2. The allowance for the TVET Scholarship grant is good for one (1) certificate program at ₱1,000 per month. The total amount will be determined by the actual timeline of the program. Maximum amount to be given for one program is ₱10,000.

- The financial assistance under the Educational Booster initiative is provided towards the cost of one (1) review program enrollment in a Review Center. The requested amount is based on the enrollment cost, the maximum amount is ₱10,000.
- To qualify for the grant, the total parental income of the recipient must be less than or equal to ₱20,000 per month.

PROCEDURE:

- To apply for the grant, download the **SIAPR-ATE FINANCIAL GRANT APPLICATION FORM** from the SIAPR website

SIAPR-ATE FINANCIAL GRANT
"Pathway to empowerment and transformation"

FORM Rev. 07.2024

APPLICATION FORM

Name of Club Applying: _____

Name & Signature of Club President: _____

Contact Number & e-mail of Club President: _____

Date of Application: _____

PICTURE OF GRANT APPLICANT
 2"x2"

PURPOSE OF GRANT:
☐ Allowance for Collegiate Scholar for Academic Year:
 College Level ☐ 1st Yr. ☐ 2nd Yr. ☐ 3rd Yr. ☐ 4th Yr. ☐ 5th Yr.
 Date of Enrollment: _____ Date When Classes Begin: _____
 Amount Requested (₱2,000/mo., max. total amount is ₱20,000/yr.): _____

☐ Allowance for TVET (Technical Vocational Education and Training) Scholar
 Program Start Date: _____ Program End Date: _____
 Amount Requested (₱1,000/mo., max. of ₱10,000): _____

☐ Financial Assistance for Board/Bar Review Classes
 Program Start Date: _____ Program End Date: _____
 Amount Requested (max. amount ₱10,000): _____

PROFILE OF GRANT RECIPIENT
 Name of Recipient: _____

(Last Name)
(First Name)
(Middle Name)

 Date of Birth: _____ Age: _____
 Contact Number: _____ Email: _____
 Intended College Course/TVET program/Review Class to be taken: _____
 Name of School/Center: _____
 Date of Enrollment: _____

For Review Class taker:
 Course/Degree: _____
 Name of College/University: _____
 Date/Year Graduated: _____

Family Profile (Total parental income must be less than ₱20,000):

Name	Age	Civil Status	Educational Attainment	Occupation/ Employment	Monthly Income
Father:					
Mother:					
Siblings:					
Parents Total Income					

The requesting club prints, fills out and submits a scanned PDF copy of the request form via email to SIAPR (sorooptimistphilippines@gmail.com c/o MS. NERIE ESCOTO) for evaluation.

- Once approved, the club President will be informed via email including the details of how the funds will be disbursed.

3. To access additional funds (mid-year update) and/or to liquidate funds (year-end update), kindly submit:
 - a scanned/digital mid-year report and a scanned/digital year-end report using the **SIAPR-ATE UPDATE ON FINANCIAL GRANTEE FORM** from the SIAPR website and email the accomplished report along with copies of the pertinent documents requested in the form to SIAPR (soroptimistphilippines@gmail.com c/o MS. NERIE ESCOTO).

SIAPR-ATE UPDATE ON FINANCIAL GRANTEE <small>"Pathway to empowerment and transformation"</small>	
FOR COLLEGIATE SCHOLAR	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <small>PICTURE OF GRANT RECIPIENT 2"X2"</small>
Name of Club: _____ Name & Signature of Club ATE chair: _____ Contact Number & e-mail of Club ATE chair: _____ Date Submitted: _____	
<input type="checkbox"/> Mid-Year Update (kindly indicate the coverage date): _____ <input type="checkbox"/> Year-End Update (kindly indicate the coverage date): _____	
GRANT RECIPIENT:	
Name of Recipient: _____ <small>(Last Name) (First Name) (Middle Name)</small>	
Date of Birth: _____ Age: _____	
Contact Number: _____ Email: _____	
<input type="checkbox"/> College Course : _____ Name of College/University: _____ Current Year Level <input type="checkbox"/> 1 st Yr. <input type="checkbox"/> 2 nd Yr. <input type="checkbox"/> 3 rd Yr. <input type="checkbox"/> 4 th Yr. <input type="checkbox"/> 5 th Yr.	
FOR MID-YEAR UPDATE:	
TERM 1: Enrollment Date: _____ Academic Year: _____	
Start of Classes: _____ End of Classes: _____	
Achievements/Awards Received (if any): _____	
Mentoring assistance provided: _____	

* Kindly submit a copy of term 1 grade, proof of enrollment for Term 2 and signed acknowledgement of allowance received.	
FOR YEAR-END REPORT:	
TERM 2: Enrollment Date: _____ Academic Year: _____	
Start of Classes: _____ End of Classes: _____	
Achievements/Awards Received (if any): _____	
Date of Graduation (if applicable): _____	
Mentoring assistance provided: _____	

* Kindly submit a copy of term 2 grade and signed acknowledgement of allowance received.	

SIAPR-ATE UPDATE ON FINANCIAL GRANTEE <small>"Pathway to empowerment and transformation"</small>	
FOR TVET/BOOSTER RECIPIENT	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <small>PICTURE OF GRANT RECIPIENT 2"X2"</small>
Name of Club: _____ Name & Signature of Club ATE chair: _____ Contact Number & e-mail of Club ATE chair: _____ Date Submitted: _____	
GRANT RECIPIENT:	
Name of Recipient: _____ <small>(Last Name) (First Name) (Middle Name)</small>	
Date of Birth: _____ Age: _____	
Contact Number: _____ Email: _____	
<input type="checkbox"/> TVET Course/Program : _____ Name of School: _____ Date Program Started: _____ Date Program Ended: _____ Employment Prospects: _____ Mentoring Assistance provided: _____ _____	
* Kindly submit a copy of the certificate of program completion and signed acknowledgement of allowance received.	
<input type="checkbox"/> Board/Bar Review Classes for : _____ Name of Review Center: _____ Date Review Started: _____ Date Review Ended: _____ Intended Date of Licensure Exam: _____ Results of Licensure Exam: _____ College Degree : _____ Name of College/University: _____ Date/Year Graduated: _____	
* Kindly submit a proof of enrollment, signed acknowledgement of allowance received and Board Results.	