Вх. №: …………………

# Application form

From:

(name, surname, last name)

|  |
| --- |
| Address: Province: Phone number:    Email address: |
| Municipality: |
| Str. № bl. entry. ap. |
| Details of the child for whom sponsorship is applied for:  Name/Surname/Last name:  ID: |
| Details of the school the child attended before being admitted to the private school: |
| Details of the private school for which sponsorship is applied for:      Requested sponsorship amount for one school year: ..........................BGN. |
| Why I chose this particular private school for my child: |

(set out in free text the reasons for the choice)

**I declare:**

**1. Information about the other parents/legal representatives :**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personal data | Parent/ declarator | | Second parent |  |
| Name |  |  |  |  |
| Surname |  |  |  |  |
| Last name |  |  |  |  |
| ID |  |  |  |  |
| Family status |  |  |  |  |
| ID №, issued on: |  |  |  |  |
| Address registration |  |  |  |  |
| Social group | Employed    Insured    retired    other | Unemployed  Uninsured  Student | Employed    Insured    retired    others | Unemployed  Uninsured  Student |

**2.** **My family has/does not have children under the age of 18 who are not married**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name, surname, last name | ID | Attends school | | State school | | On full state dependence | | Notes on health status |
| **1.** |  | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |  |
| **2.** |  | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |  |
| **3.** |  | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |  |
| **4.** |  | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |  |

**I live with the following persons:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name, surname, last name | **Address registration** | Relationship to the declarant | ID | ID №,  Issues on: |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |

1. **Persons legally obliged to provide maintenance (of the child applying for sponsorship)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name, surname, last name | Address | Relationship to the declarant | ID | ID.№,  Issued on: |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |

1. **My family's income for the previous month is:**

Total: BGN…………...

Including:

|  |
| --- |
| 1. Labour activity BGN |
| 2. Agricultural, forestry and water management activities BGN |
| 3. Sales and/or exchange of movable and immovable property BGN |
| 4. Income from shares/bonds and other participations BGN BGN  in auction. companies and other forms of ownership |
| 5. Rent, lease BGN |
| 6. Royalties and license fees BGN |
| 7. Prizes and awards from competitions BGN |
| 8. Child and/or integration allowances, BGN paid by NSSI BGN |
| 9. Pensions BGN |
| 9.1. Disability BGN |
| 9.2. Retirment BGN |
| 9.3. Inheritance BGN |
| 10. Allowance BGN |
| 11. Other income BGN |

1. **Housing**

|  |  |  |
| --- | --- | --- |
| Total ……. Sq. meters | Consists …….. rooms | ….. people live in |
| The home is owned by: | |  |
| own | state | municipality |
| rent | Do not posses | relatives |
| It is sole housing facility for the family | | Yes No |

1. **I and my family members own the following other immovable and movable property:**

|  |  |  |
| --- | --- | --- |
| House | Yes …………… quantity | No |
| Villa property | Yes …………… quantity | No |
| Agricultural land | Yes …………… quantity | No |
| Car | Yes  Brand/ model…………………...  Year ………… | No |
| Other properties |  |  |

|  |
| --- |
| **8. I and my family members have not made a transfer for consideration (sale) of immovable property and/or ideal parts thereof in the last 5 years:**  Yes No  If yes, please indicate the value of the transferred property: …………………………… |
| **9. I and my family members have not made a transfer by contract**  **the ownership of immovable properties and/or their ideal parts in the last 5 years:**    Yes No  If yes, please indicate the value of the transferred property: …………………………… |
| **10. I am not a director/partner/shareholder in a trading company.**    Yes No  If yes, please state the name of the company and explain the capacity you hold in the company: ………………………………………………………………………………….. |
| **11. The personal data I have provided in this declaration about myself, the child for whom we are applying to sponsor their education at a private school and third parties is true, accurate and provided voluntarily.**    YesNo |
| **12. I give my informed consent that the personal data provided by me, including social data about me and the child for whom we are applying for assistance, will be collected, processed and stored by the non-profit public benefit association "School for Every Child" for the purpose of providing sponsorship for private school education under the terms and conditions guaranteed by EU Regulation 2016/679 on the protection of personal data and the current Bulgarian legislation. I agree that the personal and health data provided by me will be destroyed within 5 years from the year following the year in which the last sponsorship was received. In the event of a refusal to provide sponsorship, it will be destroyed within 30 days of the day following the day on which I am notified of the decision refusing to sponsor the training.**    Yes No |
| **13. I give my informed consent that the personal data provided by me, including health data, about me and the child for whom we are applying for sponsorship for private school education may be provided for processing and/or stored to/from third parties, including Sponsors/Donors on the basis of the legitimate interest of the non-profit public benefit Association "School for Every Child" by virtue of a contract between the Association and the third party, and in cases of informed consent provided by me solely for**    Yes No |
| **14. I have been informed that upon receipt of a request for the provision of information from the Ministry of the Interior, investigative authorities, etc. in the cases provided by law in which the Association is obliged to provide them with the requested information and documents, this does not constitute a violation of the provisions of the obligation not to disclose information.**    Yes No |
| **15. I give my informed consent for the association to have the right to publish information (name, address, age, gender) about the child and the sponsorship made on paper and/or electronic media, including website and social media accounts, and to include the same information in its donation initiatives and promotional materials.**    Yes No |

|  |
| --- |
| **16. I declare that I am familiar with the Privacy Policy of the Non-Profit Public Benefit Association "School for Every Child", the content of which has been explained to me in detail, as well as the possibilities, procedure and manner of exercising my rights for the protection of personal data.**    Yes No |
| **17. For the purpose of consideration of my application, I voluntarily provide copies of the following documents indicated/marked by me below:**  **- A copy of the birth certificate of the child in need;**  **- A copy of the identity cards of myself and the other parent/carer/guardian of the child;**  **- Documents proving household income in the last 6 months;**  **- Certificate from the private school that the child has been approved to be enrolled for the school year ……./ ………. .**  **Other documents: ………………………………………………………** |
| **18. I am aware that I am criminally liable under Article 313 of the Criminal Code for declaring false facts and that I owe repayment of the sponsorship received on the basis of the false information provided in this declaration in full, together with interest for late payment under the current law.**    Yes No |

**Date: Declarotor:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/guardian/custodian of the child:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The application form has been accepted and verified by:

*Name, Last name, signature of the employee*