

# **National Kaohsiung University of Hospitality and Tourism Guidelines for the Review and Administration of Financial Aid for Economically Disadvantaged Overseas Chinese Students**

Approved and amended by internal administrative memorandum on August 23, 2010

Approved and amended by internal administrative memorandum on August 2, 2011

Approved and amended by internal administrative memorandum on August 20, 2012

- I. Legal Basis: These Guidelines have been established pursuant to subparagraph 1, Paragraph 6 of the Ministry of Education Directions for the Provision of Financial Aid to Economically Disadvantaged Overseas Chinese Students in Senior Secondary Schools and Above.
- II. Purpose: These Guidelines have been formulated to assist overseas Chinese students at this University from economically disadvantaged backgrounds who demonstrate diligence in their studies by enabling them to complete their academic programs as scheduled.
- III. Applicants for Financial Aid for Economically Disadvantaged Overseas Chinese Students must meet the following criteria:
  - (1) Be an overseas Chinese student from an economically disadvantaged family who has come to Taiwan to study in accordance with the Regulations Regarding Study and Counseling Assistance for Overseas Home Students in Taiwan (excludes graduate students and extended-study students).
  - (2) For applicants in their second year or above: Have an average academic grade for the previous academic year of at least a pass; an average conduct grade of at least 80; and must not have been subject to any disciplinary action (a reprimand or higher).
  - (3) Students who have already received tuition and miscellaneous fee subsidies, reductions or exemptions, or other scholarships funded by the government under other regulations are not eligible for this financial aid.
- IV. Subsidy Information:
  - (1) Quota:
    1. The number of recipients of this subsidy shall be determined by the Ministry of Education based on the number of enrolled overseas Chinese students at each university.
    2. The quota for first-year students shall be allocated proportionally according to the percentage of first-year overseas Chinese students relative to the total number of such students; the remaining quota shall be allocated to second-year and students in subsequent years of study.
  - (2) Amount and Duration of Subsidy: The subsidy amount shall be announced annually by the Ministry of Education based on the fiscal year budget. The subsidy period is one year, commencing from the beginning of the academic year (September) through to August 31 of the following year. Students approaching graduation shall receive their subsidy up until the month of graduation.
  - (3) If a recipient takes a leave of absence or withdraws from the University after being approved to receive this subsidy, subsidy payments shall

cease the following month. If a recipient is given a demerit or expelled pursuant to a resolution of the Student Disciplinary Committee, the subsidy shall be terminated effective the month following the University's official announcement.

- (4) Any overseas Chinese student found to have forged or submitted false documentation shall have the subsidy terminated, be required to return all funds already received, and bear relevant legal liabilities.

V. Application Procedures:

- (1) After registration at the beginning of the first semester of each academic year, each applicant shall complete the application form (Appendix 1) and submit it with proof of financial hardship and transcripts of prior academic records (not required for first-year students) to the International Affairs Office.
- (2) Transfer students shall additionally submit proof of transfer along with transcripts of previous academic records.

VI. Review Procedures:

- (1) The University's Review Committee for Financial Aid for Economically Disadvantaged Overseas Chinese Students shall comprise the Dean of International Affairs, section heads of the International Affairs Office, and representatives of overseas Chinese students. The Committee shall evaluate applications based on the Scoring Table for Financial Aid for Economically Disadvantaged Overseas Chinese Students (Appendix 2). Reviews for each academic year shall be completed by October 31, and review records shall be retained by the University for reference.

- (2) Review Criteria

1. First-year applicants shall be ranked based on their financial hardship scores in the table; applicants in their second year or subsequent years of study shall be ranked based on their total scores. In the event of a tie, students' will be ranked by priority as set out in the scoring table.
2. Applicants' living conditions in Taiwan shall also be taken into consideration.
- (3) Where necessary, family background information and overseas financial hardship certification submitted by applicants may be verified through official correspondence with the Overseas Community Affairs Council.
- (4) Applicants approved by the University shall be ranked by academic year and the list submitted annually to the Ministry of Education for final approval.

VII. The appropriation, utilization, and final accounting of funds shall be handled in accordance with the Ministry of Education Directions Governing the Disbursement and Reporting of Subsidies and Commissioned Project Funds.

VIII. These Guidelines shall be implemented upon approval by the University President. The same process shall apply to any amendments thereto.

| Academic Year _____<br>National Kaohsiung University of Hospitality and Tourism<br>Application Form for Financial Aid for Economically Disadvantaged<br>Overseas Chinese Students                                                                                                                                                                                                                                                                                                                                                                      |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----|------------------|---------------------|----------------------------------|--|---------------------------|-------------------------------------------|------------------------------------------------------------------|-----------------|--|--|
| Student ID No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                             |     |                  | Department/Year     | Department/Program<br>Year Level |  |                           | Gender                                    | <input type="checkbox"/> Male<br><input type="checkbox"/> Female |                 |  |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Chinese:<br>English:                        |     |                  | Date of Birth       | Year/Month/Date                  |  |                           | Place of Overseas Residence               |                                                                  |                 |  |  |
| Assignment Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Year/Month/Date (Required)                  |     |                  |                     |                                  |  | Date of Arrival in Taiwan | Year/Month/Date                           |                                                                  |                 |  |  |
| Assignment Document No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (____) Hai-Lian-Shi Zi No. _____ (Required) |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Current Address in Taiwan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |     |                  |                     |                                  |  |                           | Telephone                                 |                                                                  |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |     |                  |                     |                                  |  |                           | Mobile                                    |                                                                  |                 |  |  |
| Overseas Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                             |     |                  |                     |                                  |  |                           | Telephone                                 |                                                                  |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |     |                  |                     |                                  |  |                           | Mobile                                    |                                                                  |                 |  |  |
| Passport No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| ARC No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Academic Performance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | First Semester                              |     | Overall Average  |                     |                                  |  | Conduct Grade             | First Semester                            |                                                                  | Overall Average |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Second Semester                             |     |                  |                     |                                  |  |                           | Second Semester                           |                                                                  |                 |  |  |
| Family Members                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Relationship                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Name                                        | Age | Occupation/Title | Residential Address |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Father                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Mother                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| ■ Please check (✓) the applicable boxes below and fill in amounts where required.                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 1. Family Financial Status: <input type="checkbox"/> 1. Affluent <input type="checkbox"/> 2. Average <input type="checkbox"/> 3. Economically Disadvantaged                                                                                                                                                                                                                                                                                                                                                                                            |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 2. Primary Provider of Household Expenses: <input type="checkbox"/> 1. Grandparents <input type="checkbox"/> 2. Parents <input type="checkbox"/> 3. Siblings <input type="checkbox"/> 4. Others: _____                                                                                                                                                                                                                                                                                                                                                 |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 3. Ownership of Real Estate: <input type="checkbox"/> 1. Yes, estimated value: NT\$ _____ <input type="checkbox"/> 2. No                                                                                                                                                                                                                                                                                                                                                                                                                               |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 4. Monthly Household Income and Expenditure.<br>Total Monthly Income: NT\$ _____ Total Monthly Expenditure: NT\$ _____                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 5. Estimated Monthly Living Expenses While Studying NT\$ _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| 6. Current Sources of Educational and Living Expenses<br><input type="checkbox"/> 1. Supported by family in place of overseas residence<br><input type="checkbox"/> 2. Supported by relatives/friends in place of overseas residence<br><input type="checkbox"/> 3. Supported by family in Taiwan<br><input type="checkbox"/> 4. Supported by relatives in Taiwan<br><input type="checkbox"/> 5. Supported by part-time work during studies<br><input type="checkbox"/> 6. Supported by overseas Chinese student work-study allowance or financial aid |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Brief Description of Family Financial Hardship and Reason for Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |     |                  |                     |                                  |  |                           |                                           |                                                                  |                 |  |  |
| Advisor's Signature/Seal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                             |     |                  |                     |                                  |  |                           | Department/Program Chair's Signature/Seal |                                                                  |                 |  |  |

# National Kaohsiung University of Hospitality and Tourism

## Scoring Table for Financial Aid for Economically Disadvantaged Overseas Chinese Students

Date:

|                                                                                                          |  |                                                                     |                                  |                |                       |
|----------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------|----------------------------------|----------------|-----------------------|
| Name                                                                                                     |  | Department/Year                                                     | Department/Program<br>Year Level | Student ID No. |                       |
| Current Address                                                                                          |  |                                                                     |                                  |                |                       |
| Telephone Number                                                                                         |  |                                                                     |                                  |                |                       |
| Place of Overseas Residence                                                                              |  |                                                                     |                                  |                |                       |
| Overseas Address                                                                                         |  |                                                                     |                                  |                |                       |
| Interview Assessment                                                                                     |  | Points                                                              |                                  |                | Self-Assessment Score |
| 1. Parental Status                                                                                       |  | Both parents deceased                                               |                                  | 6              |                       |
|                                                                                                          |  | Father deceased                                                     |                                  | 5              |                       |
|                                                                                                          |  | Mother deceased                                                     |                                  | 4              |                       |
|                                                                                                          |  | Single-parent family                                                |                                  | 3              |                       |
|                                                                                                          |  | Supporting grandparents                                             |                                  | 2              |                       |
|                                                                                                          |  | Both parents alive                                                  |                                  | 1              |                       |
| 2. Disability, Serious Illness, or Long-Term Medical Treatment (Supporting medical certificate required) |  | Applicant has a disability                                          |                                  | 5              |                       |
|                                                                                                          |  | Family member has a disability                                      |                                  | 4              |                       |
|                                                                                                          |  | Applicant has a serious illness requiring long-term treatment       |                                  | 3              |                       |
|                                                                                                          |  | Family member has a serious illness requiring long-term treatment   |                                  | 2              |                       |
|                                                                                                          |  | None                                                                |                                  | 1              |                       |
| 3. Number of Family Members Currently Enrolled in School (Enrollment certificate required)               |  | 6 or more                                                           |                                  | 5              |                       |
|                                                                                                          |  | 5 or more                                                           |                                  | 4              |                       |
|                                                                                                          |  | 4 or more                                                           |                                  | 3              |                       |
|                                                                                                          |  | 3 or more                                                           |                                  | 2              |                       |
|                                                                                                          |  | 2 or more                                                           |                                  | 1              |                       |
| 4. Number of Income Earners in the Household                                                             |  | No employed family members                                          |                                  | 4              |                       |
|                                                                                                          |  | Casual/temporary workers                                            |                                  | 3              |                       |
|                                                                                                          |  | One person with stable employment (including self-employment)       |                                  | 2              |                       |
|                                                                                                          |  | Two persons with stable employment (including self-employment)      |                                  | 1              |                       |
| 5. Source of Tuition and Living Expenses                                                                 |  | Bank loans                                                          |                                  | 4              |                       |
|                                                                                                          |  | Part-time work                                                      |                                  | 3              |                       |
|                                                                                                          |  | Support from relatives or friends                                   |                                  | 2              |                       |
|                                                                                                          |  | Support from parents                                                |                                  | 1              |                       |
| 6. Housing Status of the Family Residence                                                                |  | Living with others (rent-free)                                      |                                  | 4              |                       |
|                                                                                                          |  | Rental housing                                                      |                                  | 3              |                       |
|                                                                                                          |  | Owner-occupied with mortgage                                        |                                  | 2              |                       |
|                                                                                                          |  | Owner-occupied without mortgage                                     |                                  | 1              |                       |
| 7. Submission of Financial Hardship Certification                                                        |  | Issued by a government authority                                    |                                  | 7              |                       |
|                                                                                                          |  | Issued by a school in the place of overseas residence               |                                  | 5              |                       |
|                                                                                                          |  | Issued by a private organization in the place of overseas residence |                                  | 3              |                       |
| 8. Major Family Emergency or Special Circumstances Affecting Livelihood (Not listed above)               |  |                                                                     |                                  | 5              |                       |
| Financial Hardship Score                                                                                 |  | Subtotal                                                            |                                  |                |                       |
| 9. Cumulative <u>Academic</u> Average for the Previous Academic Year                                     |  | Above 80.01                                                         |                                  | 5              |                       |
|                                                                                                          |  | 75.01-80                                                            |                                  | 4              |                       |
|                                                                                                          |  | 70.01-75                                                            |                                  | 3              |                       |
|                                                                                                          |  | 65.01-70                                                            |                                  | 2              |                       |
|                                                                                                          |  | 60-65                                                               |                                  | 1              |                       |
| 10. Overall <u>Conduct</u> Grade for the Previous Academic Year                                          |  | Above 85.01                                                         |                                  | 5              |                       |
|                                                                                                          |  | 84.01-85                                                            |                                  | 4              |                       |
|                                                                                                          |  | 83.01-84                                                            |                                  | 3              |                       |
|                                                                                                          |  | 82.01-83                                                            |                                  | 2              |                       |
|                                                                                                          |  | 80-82                                                               |                                  | 1              |                       |
| Total Score                                                                                              |  |                                                                     |                                  |                |                       |

National Kaohsiung University of Hospitality and Tourism  
Supporting Documents Attachment Form for Financial Aid for Economically  
Disadvantaged Overseas Chinese Students

〔 Photocopy of ARC or National ID  
Card (Front Side) — Affix Here 〕

〔 Photocopy of ARC or National  
ID Card (Reverse Side) — Affix 〕

〔 Photocopy of Student ID Card  
(Front Side) — Affix Here 〕

〔 Photocopy of Student ID Card  
(Reverse Side) — Affix Here 〕

Post Office Account No.: □□□□□□□-□□□□□□□□

Class: \_\_\_\_\_

Name: \_\_\_\_\_

Student ID No.: \_\_\_\_\_

( Post Office Account Book  
Photocopy — Affix Here )

■ Supporting Documents (Please arrange in the following order):

1. Application Form
2. Scoring Table
3. Supporting Documents (Photocopies of ARC or National ID Card / Student ID Card / Post Office Account Book / Original Certificate of Enrollment)
4. University Entrance Committee for Overseas Compatriot Students Assignment Notice (photocopy acceptable)
5. Financial Hardship Certificate or Other Supporting Documents (photocopy acceptable)
6. For applicants in the second year or subsequent years of study: Official transcripts of academic records (original required)

■ Declaration:

I hereby declare that, by applying for Financial Aid for Economically Disadvantaged Overseas Chinese Students, I have fully understood the University's Review and Administration Guidelines and agree to comply with all applicable regulations. I also confirm that all supporting documents and certification materials submitted are true and accurate. Should any document be found to be forged or contain false information, I agree that financial aid shall be terminated, any funds already received shall be repaid, and I shall bear all relevant legal liabilities.

Applicant: \_\_\_\_\_ (Signature/Seal)

Date: \_\_\_\_\_