



SFAS 2023 Application Form C – FODE

This application form is for FODE Institutions in Bougainville only.

The following is a guideline on how to fill in each section of the application form:

Section A

1. This is for **Ministerial use only**.
2. When you submit your application form, an officer from the Ministry of Education will complete this section.

Section B

1. This checklist determines whether you have fulfilled all the requirements of submitting a complete form to be eligible for selection.
2. A registry of the students and the tuition fee structure must be attached to the completed application form.
3. Your institution must be verified by the relevant authorities in *Section E* of the application.
4. If your institution is unable to provide any of the required attachments, please make sure that you have genuine reasons as to why, so that your application can be considered for selection. If there is not enough space on the form to write, you can attach a letter that outlines your reasons.

Section C

1. It is important that you fill in all the institutions details to ensure your data is captured and registered accurately in the SFAS Registry. Where sections do not apply to you, please indicate with 'N/A' (means **Not Applicable**).
2. It is vital that you indicate the type of FODE institution and include details on provision of facilities such as accommodation and including grades and subjects offered.
3. You should provide contact information for the institution, so that the Ministry of Education is able to keep you updated on the progress of your application.
4. For reference, *Region* refers to whether the institution is located in North, Central or South Bougainville.

Section D

1. Apart from filling in this section, you must also attach the tuition fee structure where you outline the fees charged and what these costs cover.
2. The *Total tuition cost (Annual)* refers to the total sum of tuition per head for the entire year.
3. If your institution is receives assistance through other government schemes and policies, it is important to provide that information.

Section E

1. This section is for the relevant authorities to verify your FODE institution as being a recognised institute.
2. The relevant authority must sign and stamp this section.
3. Where applicable, you may attach a verification letter signed and stamped by the authority instead of filling out this section of the form.

Section F and G

1. Please read and understand the terms and conditions before you sign the agreement on behalf of the institution.
2. In the Statement of Agreement, the authority signing on behalf of the institution, must write their name, position, sign, and date. It should also be stamped by the school as proof of legitimacy.

Submit applications via
WhatsApp to SFAS Hotline: 73662514 or
Send Email to abgsfasprogram@gmail.com



ABG SCHOOL FEE ASSISTANCE SCHEME PROGRAM

Section A

Date Received	
Name of Institution	
No. of Students	
Serial Number	

For Ministerial Use Only

Section B

ELIGIBILITY CHECKLIST FOR INSTITUTIONS

<input type="checkbox"/> Registry of students	<p><i>A Registry must be attached to this application form and include the following information for each student:</i></p> <ul style="list-style-type: none"> • Full Name • Gender • Date of Birth • Age • Marital status • Region (North, Central, South) • District • Constituency • Parents Occupation • Last School Attended & year completed • Current Grade • Status (Full correspondence or Upgrader) • No. of subjects • Name of subjects • Cost per subject • Total tuition cost for the year • Duration of study
<input type="checkbox"/> Verification of Institution	<p><i>Depending on the type of FODE Institution Verification can be from any of these authorities:</i></p> <ul style="list-style-type: none"> • ABG Department of Education • Provincial FODE Coordinator • National FODE Coordinator
<input type="checkbox"/> Fully completed application form	<p><i>The application form must be fully complete with necessary information provided.</i></p>
<input type="checkbox"/> Tuition Fee Structure	<p><i>A tuition fee structure must be attached to this application form, outlining how school fees are charged, the break-up of the fees to indicate what costs are covered in this fee.</i></p>

Take Note:

- Applications close on the **3rd of March, 2023**
- Your eligibility to be supported will be based on the completion of the checklist
- Failure to do so will affect your chances of proper screening and selection to be supported
- If there are genuine reasons for not being able to provide relevant attachments, please state why.

Section C

Complete the following sections on the institution details, please circle and tick where necessary:

INSTITUTION DETAILS						
NAME OF INSTITUTION						
TYPE OF FODE INSTITUTION	PUBLIC	PRIVATE	ARE BOARDING FACILITIES PROVIDED?		YES	NO
	CSC	RSC				
WHAT GRADES ARE OFFERED AT YOUR INSTITUTION?	<input type="checkbox"/> GRADE 7	<input type="checkbox"/> GRADE 8	<input type="checkbox"/> GRADE 9	<input type="checkbox"/> GRADE 10	<input type="checkbox"/> GRADE 11	<input type="checkbox"/> GRADE 12
NO. OF STUDENTS CURRENTLY ENROLLED FOR THE YEAR?						
LOCATION						
REGION						
CONSTITUENCY						
WARD						
CONTACT INFORMATION						
NAME OF SUPERVISOR		CONTACT NUMBERS		EMAIL		
NAME OF PRINCIPAL/REGISTRAR						
NAME OF FINANCE OFFICER						

Section D

The tuition fee structure must be attached to this application form to further explain the tuition fee charges:

TUITION FEES				
TOTAL TUITION COST (ANNUAL)				
ABG WILL ONLY ASSIST WITH 60% OF YOUR TOTAL TUITION COST PER STUDENT	WILL THE INSITUTION BE RECEIVING ASSISTANCE FROM:			
	NATIONAL MPs?	YES	NO	
	CONSTITUENCY MEMBERS?	YES	NO	
	NATIONAL DEPT. OF EDUCATION?	YES	NO	
	DHERST?	YES	NO	
IF YOU ANSWERED YES TO RECEIVING ASSISTANCE FROM OTHER SOURCES, PLEASE STATE WHICH MPS, MEMBERS ETC ARE PROVIDING ASSISTANCE TO YOUR INSITUTION				
SCHOOL ACCOUNT DETAILS				
ACCOUNT NAME		ACCOUNT NUMBER		BANK

Section E

Verification can be from any one of these authorities depending on the type of FODE institution:

VERIFICATION	
RECOGNITION FROM BOUGAINVILLE EDUCATION BOARD	
PROVINCIAL FODE COORDINATOR	
NATIONAL FODE COORDINATOR	

STATEMENT OF VERIFICATION

As the , I verify

(Title) (Name of FODE Centre)

as a recognized FODE institution.

Name.....Signature.....

Date...../...../.....

Section F

TERMS AND CONDITIONS

Part 1 – Payment of Fees:

- a) The Autonomous Bougainville Government is only responsible for paying 60% of the total tuition cost per student
- b) Institutions are responsible for providing a receipt of payment from their school administrations to the Ministry of Education
- c) Institutions must ensure that the parents or guardians of students under this school fee assistance scheme are only charged 40% of total tuition
- d) The institution is responsible for ensuring that students are encouraged to complete their FODE Education
- e) The institution is responsible for providing data to the Ministry of Education on the number of students that have completed their studies at the end of the year
- f) The institution must provide list of students withdrawn due to non-payment of fees

Part 2 – Civic Duties and Social Obligations:

As an Institute of FODE Education operating in the Autonomous Region of Bougainville, ABG requires that the school provide updates about the progress of the institution and supported students.

The Ministry of Education welcomes recommendations and ideas from the school about alternative pathways to enable better opportunities for its students.

The institution must ensure that they will maintain a relationship with the Ministry of Education, and provide regular updates in line with the terms and conditions.

Section G

STATEMENT OF AGREEMENT

I _____, as the _____ on behalf of the institution, hereby declare that the details of this application form are true and factual, and that the information provided have not been fabricated to meet the criteria.

I accept and agree to all terms and conditions on behalf of the institution and can guarantee that the institution fully understands the terms and conditions outlined by the Autonomous Bougainville Government.

Should the institution be in breach of the terms and conditions, I fully understand that ABG Ministry of Education has the right to revoke its School Fee Assistance Scheme support.

I decree that updates will be provided to the Ministry on students' and institution's progress in continuing to dedicate time, effort and resources to serve the government and people in contributing to the development of the Autonomous Region of Bougainville.

SIGN..... DATE: / /

WITNESS NAME: SIGN: DATE: / /

Please take note:

- This agreement is between the institution and the Ministry of Education under the ABG SFAS Program 2023.
- No one other than the appropriate authorities of the institution are to sign the statement of agreement on behalf of the institution.