



Gästrik-Hälsinge Nation

MONITORING FORM

Signatory, student of Gästrik-Hälsinge Nation, who is currently holding scholarship/s hereby declare that I for the majority of the current semester will be a full time student at Uppsala University. I am aware that misinformation in this affirmation would mean reimbursement and in some cases legal action

..... / /
Date	Swedish tax file number
.....
Signature	Street address
.....
Name in block letters	Postal Address

I hereby confirm that is registered at the institution and attends to the course at its normal pace.

.....
Name och professional title

.....
Seal and title

Should you be granted the scholarship, the amount will be transferred into your bank account. The scholarship can only be transferred into a Swedish bank account. Please fill out the following details:

Account number.....Clearing number.....Bank.....

This form is not valid for scholarship holders who intend to monitor a scholarship administered by Uppsala University. For information regarding these scholarships; please contact the university scholarship office.