

Instructions:

1. Applicant to complete **Section 1** and ensure the eligibility requirements are met and supporting documents are provided.
2. Please submit all supporting documents in accordance with the eligibility criteria.
3. Provide accurate and verifiable information. Incomplete applications may be disqualified.
4. Student must retain a minimum cGPA of 3.5 and satisfactory disciplinary standing throughout the master's program to retain the award.
5. Applicant must submit the application to the GSU Office after receiving the acceptance or conditional acceptance letter and prior to the commencement of the graduate program.
6. Submission does not guarantee award. Selection is competitive and subject to GSU committee decisions.
7. Only one award can be availed at a given time.
8. Applicants must submit completed applications and all supporting documents to GSU.Incentives@udst.edu.qa

Eligibility Criteria

- Applicant holds a minimum cumulative GPA of 3.5 or above on the scale of 4.0.
- Applicant is a Resident of Qatar.
- Applicant is an external student and has not previously completed any degree level qualification at UDST.

Required Documents

- Applicant has attached the acceptance letter or conditional acceptance letter from UDST to be considered for the award
- Applicant has attached a Statement of Justification (350-400 words).
- Academic Transcript of most recent degree
- Applicant has attached a Reference letter.
- Applicant has attached copy of valid QID.
- Applicant has attached copy of valid QID for all dependents (if any).
- Applicant has provided income verification showing the family income is QAR 12,000 or less.

Section 1: Applicant Information

Full Name: _____
 Bachelor's Degree Title: _____
 Institution/University Awarding the bachelor's degree: _____
 Graduate Program Title: _____
 Cumulative GPA in bachelor's degree: _____
 Qatar Identity Number (QID) _____
 Number of dependents: _____
 Family Income (please tick relevant box and provide evidence)
 5,000 or Below 5,001–7,999 8,000–9,999 10,000–12,000 more than 12,000

Name of Applicant: _____ Signature: _____ Date: _____

Section 2: GSU Office Use Only

Instructions:

1. Confirm that the eligibility requirements are met before proceeding with scoring.
2. Assign scores based only on documented and verifiable evidence submitted by the applicant.

Evaluation criteria to be filled by the GSU Committee Member (100 Points Total)

Category	Criteria	Level	Score
Academic Performance	<input type="checkbox"/> GPA verified via official transcript	<input type="checkbox"/> 3.90–4.00 (40) <input type="checkbox"/> 3.75–3.89 (30) <input type="checkbox"/> 3.60–3.74 (20) <input type="checkbox"/> 3.50–3.59 (10)	__ /40
Family Income	<input type="checkbox"/> Verified Salary Certificate (QAR) <input type="checkbox"/> Bank Statements (last 3 months)	<input type="checkbox"/> 5,000 or Below (40) <input type="checkbox"/> 5,001–7,999 (30) <input type="checkbox"/> 8,000–9,999 (20) <input type="checkbox"/> 10,000–12,000 (10) <input type="checkbox"/> More than 12,000 (Not eligible for the award)	__ /40
Number of Dependents	<input type="checkbox"/> Valid QID of dependents	<input type="checkbox"/> 5 or more dependents (10) <input type="checkbox"/> 3-4 dependents (8) <input type="checkbox"/> 1-2 dependents (5) <input type="checkbox"/> None (0)	__ /10
Statement of Justification (350-400 words)	<input type="checkbox"/> Commitment to Academic Excellence <input type="checkbox"/> Current Financial Circumstances and Educational Expenses <input type="checkbox"/> Contribution to UDST Strategic Priorities <input type="checkbox"/> Reference Letter	<input type="checkbox"/> Exceptional (10) <input type="checkbox"/> Strong (8) <input type="checkbox"/> Adequate (6) <input type="checkbox"/> Limited (3) <input type="checkbox"/> Weak (0)	__ /10
Final score			____ / 100

GSU Committee Member Name: _____ **Signature:** _____ **Date:** _____

FINAL SUMMARY To be filed by the GSU Committee Chair

Consolidated Final Score: _____ / 100

Recommendation Waiver:

25% (90–100) 20% (80–89) 15% (70–79) 10% (60–69) Not Eligible

Committee Chair Name: _____ **Signature:** _____ **Date:** _____

- President's approval Date:
- Finance Office informed Date:
- GSU Records updated: