Annex C. Sample Scholarship Contract Between Scholar and Network

	Detirecti Conolai and Network			
I, (Name of Scholar), of legal age and a resident of (Complete Address) understand that an educational scholarship has been awarded to me so that I may enroll in and complete the (Title of Course or Training).				
The amount of this scholarship is (amount in words fee for the program.	and figures) which is % of the total			
 Accepting this scholarship means that I agree to the I will finish the program in (durating that (Network/Base Organization) shall / shadenefits or allowances beyond the amount scholarship All outputs expected of me by (Network or time (specify outputs and deadlines, if need legibility and content. The amount of the scholarship indicated about the scholarship indicat	ion, from mm/yy to mm/yy) all not provide me with regular salaries, ant above during the duration of my Base Organization) will be turned in on ded) and will be satisfactory as far as			
other matriculation fees. All other costs associated books, equipment, testing fees, travel experimental contribution to pursuing the prescribed contribution and figures) or 5% of the amount of some some some some series of the amount of some series of the series of the amount of the series of the amount of the series o	ciated with the course are mine, such as enses and allowances. My counterpart urse shall not be less than (amount in cholarship grant. nization and Network) and CODE-NGO			
 I commit to share what I will learn fro Organization) through the following: activities to re-integrate into the Netwo scholarship). 	(indicate planned			
I further understand that if I do not abide by the above-stated terms, that I may be dismissed from the scholarship program. At the time of dismissal, I will become responsible for repaying the scholarship amount used up to that point. Arrangements will be made with (<i>the Network</i>) to repay this money. If monies are not repaid, I allow the Network and CODE-NGO to seek reimbursement through legal avenues.				
By taking a personal inventory of my circumstances, I am able to make the commitment needed to finish this scholarship program. I understand the amount of time and effort needed to graduate.				
By signing this contract, I am agreeing that it is a fa and agree to all terms of the contract and will work to	• •			
Of Scholar c	Signature over Printed Name of Network ED/Coordinator Date			