



SIXTH FORM SCHOLARSHIP APPLICATION

Please ensure that you review your application for accuracy and completeness before submitting it. If you believe there are any special circumstances concerning your application which you would like the committee to consider, please attach a written explanation.

PERSONAL INFORMATION

Name: First Name Middle Name Last Name Suffix (Jr, II, etc)

Date of Birth: DD / MM / YYYY Sex: Male Female

Address: Street District

Cell Number: Email Address:

FAMILY INFORMATION

Who do you permanently live with? Mother Father Both Parents Other

Number of Household Members: Number of Siblings: Number of Siblings on Scholarship:

CONTACT PERSON

Name: First Name Middle Name Last Name

Relationship to Applicant: Mother Father Other

Cell Number: Email Address:

Occupation: Employer:

Full-Time Part-Time Self-Employed Unemployed Monthly Salary:

EDUCATIONAL INFORMATION

Name of current High School:

High School Program of Study: Expected Graduation Date: DD / MM / YYYY

School's Address: Street District

Principal's/Dean's Name: First Name Last Name

Principal's Phone Number: Principal's Email Address:

Grade/GPA: 1st Form 2nd Form 3rd Form 4th Form

Name of Sixth Form you wish to attend:

Desired Program of Study:

ESSAY

**Explain in your own words, why you are deserving of this scholarship and state you career aspiration.
(Do not exceed 500 words)**