



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: ____/____/____ Sex: Male Female
DD / MM / YYYY

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: _____
Title (Ms./Mrs./Mr./Dr. 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)