



APPLICATION FORM

CUIB COMMUNITY STAKEHOLDERS SCHOLARSHIP SCHEME (C2S3)

Surname: \_\_\_\_\_ Other Names: \_\_\_\_\_

Date of Birth: \_\_/\_\_/\_\_\_\_ Place: \_\_\_\_\_ Gender: Male  Female

Village Community: \_\_\_\_\_ Address \_\_\_\_\_

Names of Parents: Father \_\_\_\_\_ Mother \_\_\_\_\_

HND Program you are applying for: \_\_\_\_\_

Educational Background

Date		School Attendance	Certificate Obtained
From	To		

Why do you consider yourself underprivileged?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Additional Information:** Any additional information you believe can help your application should be attached to this form.

**Endorsement:** By Chief/ Village community Leader

I, \_\_\_\_\_ hereby endorse the nomination of \_\_\_\_\_ from my community for the CUIB Community Stakeholders Scholarship Scheme \_\_\_\_\_ academic year.

**Declaration:** By Candidate

I, \_\_\_\_\_ hereby declare that all the information I have given is true. I have read the general conditions of award of this scholarship and agree with them. I understand that a nomination by my community does not automatically give me a scholarship. I also understand that the Scholarship may be terminated at any time for reasons of unsatisfactory conduct, progress, or attendance.

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_