

**SCHOLARSHIP APPLICATION FORM**

*(Passport Picture)*

## APPLICANT DETAILS

**Applicant Name: Sex:**

**Date of Birth: Age:**

**Applicant’s Grade:**  **Staff ID:**

**Ministry/Department:**

**Directorate/Unit:**

**Region:**

## INSTITUTION DETAILS

**Programme of Study:**

**Academic Institution:**

**Admission Date: Completion Date:**

**Duration: Mode of Study:**

**Student ID: Tuition:**

## CONTACT DETAILS

**Mobile Number(s):**

**Email Address:**

**National ID Type: ID Number:**

## DOCUMENTS TO ATTACH

* **Scanned Copy of Admission Letter**
* **Scanned Copy of First/Second Degree Certificate (where applicable)**
* **Fees Schedule**
* **Copy of First Appointment Letter into the Civil Service**
* **Scanned Copy of Present Appointment Letter**

# DECLARATION

**The information furnished by me is complete and correct. I bear the complete responsibility for all the above information provided.**

**Applicant’s Signature:**

**Date:**

**ENDORSEMENT:**

**Chief Director’s Signature:**

**Date:**

**OR**

**Head of Department’s Signature:**

**Date:**