



PRECIOUS CORNERSTONE UNIVERSITY

APPLICATION FORM FOR SCHOLARSHIP

SECTION A:

APPLICANT'S PERSONAL DETAILS

(To be completed in capital letters)

Name in full:

Gender:

Contact Address:

Email:

Phone Number:

Nationality:

State of Origin:

Local Government Area

Date of Birth:

Name of Parents/ Guardian in Full:

Relationship:

Email:

Phone Number:

Address of Parents/ Guardian:

Occupation:

Business Address:

SECTION B

ACADEMIC RECORD

JAMB Score:

Academic Programme:

Department:

Faculty:

Name and Address of Institution Attended	PERIOD		QUALIFICATION OBTAINED	List of O'level subjects	GRADE
	From	To			
Examination Date:					
Centre:					
Examination Number:					

DECLARATION

I solemnly declare that all the information provided herewith are correct and true. I therefore accept responsibility for any inaccuracies or falsification, which the University may discover at any time and which may lead to termination of the scholarship or my studentship.

Name of applicant (in full)

Signature

Date

For Official Use Only

Rating/Scoring: JAMB

O'LEVEL

Screening Test Scoring

Total

Comment: Recommended

Not recommended

Name and Signature of Officer Recommending/NOT Recommending

Approval by -----
Name Signature Date

Designation: -----