

# PENTECOST UNIVERSITY COLLEGE SCHOLARSHIP APPLICATION FORM

Please affix your passport picture here

## **INSTRUCTIONS:**

Please fill all portions of this form and attach all relevant documents to it. This should reach the Scholarship Office not later than 30<sup>th</sup> July each year. Send this to the address at the end of this application. (You risk losing your chances of success if you do not complete your application properly.)

# **SECTION A**

PARTICULARS OF APPLICANT			
SURNAME	DATE OF BIRTH		
	DD	MM	YYYY
FIRST NAME	NATIONAL	ITY	·
OTHER NAMES	GENDER		
	MALE		FEMALE
DEGREE ENROLLED	STUDENT	ID	
STATUS			
NEW STUDENT TO PUC			
PUC CONTINUING STUDENT	LEV	EL	
GRADE POINT AVERAGE (GPA): (on a 4.0 scale)			
(For Continuing Students: Attach proof of GPA. Your most recent official school transcript is required)			

# **SECTION B**

MAILING AND COMMUNICATION ADDRESS			
POSTAL ADDRESS:	TELEPHONE NO.:		
COUNTRY:	EMAIL:		

# **SECTION C**

WHICH SCHOLARSHIP ARE YOU APPLYING FOR (please tick appropriate box)						
FULL SCHOLARSHIP						
HALF SCHOLARSHIP						
1/3 SCHOLARSHIP						
SECTION D						
EDUCATION	ON (list i	n order of time	e, since Senic	r High S	chool)	
Name of institution and place of study	Major study	field of	Years of s (Month/)		Certification	Grade
SECTION E						
F	RELIGIO	OUS BACK	GROUNI	)		
NAME OF RELIGION						
NAME AND ADDRESS OF RELIGIOUS LEADER TELEPHONE NUMBER						
SECTION F						
PERSONAL VALUES (Briefly state v	vhat your co	re personal values	are)			

# **SECTION G**

INFORMATION ABOUT FATHER				
Full Name:	Oate of Birth:/(dd/mm/yyyy)			
	Current Work Status:			
☐ Married ☐ Separated	Employed			
☐ Divorced ☐ Deceased	☐ Unemployed ☐ Pensioner			
If Employed, Employer's Name and Address				
Job Title: Annual				
INFORMATION A	BOUT MOTHER			
Full Name:	Date of Birth:/(dd/mm/yyyy)			
Identity Card / Passport No.:				
Place of Issue: Da	ate of Issue:/(dd/mm/yyyy)			
	Current Work Status:			
☐ Married ☐ Separated	Employed			
☐ Divorced ☐ Deceased	☐ Unemployed ☐ Pensioner			
If Employed, Employer's Name and Address				
Job Title: Annual Income in GHANA CEDIS:				
INFORMATION ABOUT APPLICANT'S GUARDIAN				
	birth:/ (dd/mm/yy)			
	rrent Work Status:			
☐ Married ☐ Separated ☐	Employed			
☐ Divorced ☐ Deceased ☐	Unemployed Pensioner			
If employed, Employer" name and Address				
Job title: Annual Income in GHANA CEDIS				

#### **SECTION H**

# **High School Honors, Awards and Activities**

Please list all your important high school activities, dates of participation, awards, and offices held (include student representations, sports, school publications, arts, and debate programs, etc.)

Activity	Date	Awards	Office
	·		

#### **SECTION I**

## **Personal Essay**

On a separate sheet of paper, answer the following essay questions below. Please type the essay in font sixe 12, with a line spacing of 1.5 and should be a maximum of two pages.

1. Briefly explain why you should be awarded this scholarship.

#### **SECTION I**

### PRIVACY DECLARATION

The information requested in the application form will be used solely for the purpose of assessing your application for the scholarship for which you are applying. Personal information contained in this application will be made available to members of the Scholarship Committee and staff of the Scholarship office only.

CHECKLIST (Please tick when you have attached the following documents)
Scholarship application form
A copy of an unconditional admission letter from the University College
The applicant's Result Slip or Transcript of previous studies
Letters of recommendation from a Teacher, Counselor or Minister of Religion, and
Principal/Vice Principal of a reputable institution
A brief explanation of why you should be awarded this scholarship (250 words maximum)
Two recent Passport pictures (not older than 6 months)
Birth Certificate/Baptismal Certificate/Affidavit
Copy of an Official pay slip or payroll record of parent/guardian or the applicant
Copy of a death certificate or witness by Religious leader
Pensions letter or retired parent/guardians
Copy of School, NHIS, Voter's or National ID cards
Self-addressed envelope
STUDENT DECLARATION
I declare that all the particulars furnished by me on this application
form are genuine and reflect my true records.
DATE: SIGNATURE
*************

Please mail all completed forms along with other required information to:

The Scholarship Coordinator

Pentecost University College

P.O. Box KN 1739 Kaneshie Accra

You may also present it to the Scholarship office directly.

APPLICATIONS RECEIVED AFTER  $30^{\text{th}}$  July will not be accepted. An incomplete Application will not be accepted.

FOR OFFICIAL USE ONLY		
RECEIVED		
Date:	Time	
Signature		
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