THE SADHU T.L. VASWANI/INDIAN ASSOCIATION OF GHANA ENDOWMENT FUND AWARDS TENABLE AT THE UNIVERSITY OF GHANA, 2018/19 ACADEMIC YEAR

Application forms for the above awards are available on-line at the University’s website:

www.ug.edu.gh

Eligibility - Awards are open to needy and deserving students of the University in the fourth year of their programmes (currently in Level 400) with a minimum Cumulative Grade Point Average (CGPA) of 3.0 in the following areas:

Business
Economics
Mathematics
Science
Medicine

Completed application forms accompanied by an official transcript, should be returned to:

The Admissions Officer
Registrar’s Offices
University of Ghana
Legon

Closing Date: January 31, 2019

REGISTRAR
THE SADHU T.L. VASWANI/INDIAN ASSOCIATION OF GHANA ENDOWMENT FUND 2018/19

SCHOLARSHIP APPLICATION FORM

Section A to be completed by applicant

1. Name in full: ………………………………………………………………………………
   (Surname first)

2. Sex: M / F

3. Date of Birth: ……………………………

4. Nationality: Ghanaian? Yes / No

5a. Do you have any disability? Yes / No

5b. If ‘yes’ specify ………………………………………………………………

6a. Permanent Address ………………………………………………………………………

6b. Telephone No. (s)…………………………………………………………
   E-mail Address ………………………………………………………………………

7a. Are you on any grant scholarship/bursary? Yes / No …………………

7b. If yes, please specify ……………………………………………………………

8a. If on study leave, name and address of employer ……………………………

9. Schools attended: From To

   Year Month Year Month

   (i) …………………………………………………………………………………

   (ii) …………………………………………………………………………………

   (iii) …………………………………………………………………………………

10. Course being undertaken ……………………………………………………………

    (Attach officially signed transcript – most recent)

11. Attach a handwritten application and 2 passport-size photographs.

   Signature …………………………… Date: ………………………..
Section B to be completed by Parents/Guardian

1. (a) Name of Father/Guardian ...........................................
   (b) Father’s/Guardian’s occupation and address
       ........................................................................
   (c) Approximate annual income
       ........................................................................

2. (a) Name of Mother: ......................................................
   (b) Mother’s occupation & address:
       ........................................................................
   (c) Approximate annual income
       ........................................................................

3. Other children/wards in school/college
   
   Name          Date of Birth     School/Institution
   (i)                        ...........................................................
   (ii)                      ............................................................
   (iii)                     .............................................................
   (iv)                      .............................................................
   (v)                       .............................................................

4. Any other information which demonstrates need for financial assistance
   ..................................................................................
   ..................................................................................

   PLEASE NOTE
   Any false information on this form will disqualify an applicant

Parent/Guardian’s signature .............................. Date .................

For official use only

1. Comments/remarks .........................................................
   ..................................................................................

2. Recommended/Not recommended ..............................