

PART 1. APPLICANT'S INFORMATION

1. a) Surname		b) First Name		c) Other Name(s)																							
2. Date of Birth (dd/mm/yy)		3. Gender Male: <input type="checkbox"/> Female: <input type="checkbox"/>		4. Student ID # <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>												5. Index Number <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>											
6.a) Place of Birth:		b) Residential Address		7. Nationality																							
8. E-Mail Address		9. Hall of Affiliation		10. Student Vodafone #																							
11. Other Mobile #		12. Programme		13. Duration of Programme																							
14. Current CWA		15. College		16. Faculty																							
17. Department		18. Year (eg. Level 100)		19. Indicate the mode by which you gained admission to the University. a) Less Endowed Student <input type="checkbox"/> b) Parallel Student <input type="checkbox"/> c) Fee-Paying Student <input type="checkbox"/> d) Regular Student <input type="checkbox"/> e) Other <input type="checkbox"/>																							
20. Residential Address when school is in session.		21. Have you benefited from any scholarship/bursary from KNUST? YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes state Source Date Amount		22. If you have benefited from any other scholarship/bursary Please state Source: Date: Amount:																							
23. Name of Schools Attended		Programme of study		Period of Attendance																							
a) SHS/ TECHNICAL																											
b) JHS																											
				Who paid for your education and upkeep at this level.																							

PART 2. PARENTS INFORMATION

FATHER		9. Check the box if Deceased <input type="checkbox"/>		MOTHER		9. Check the box if Deceased <input type="checkbox"/>	
1. Name				1. Name			
2. Marital Status	a) Single <input type="checkbox"/> b) Married <input type="checkbox"/> c) Separated/Divorced <input type="checkbox"/>	2. Marital Status	a) Single <input type="checkbox"/> b) Married <input type="checkbox"/> c) Separated/Divorced <input type="checkbox"/>				
3. Residential Address	4. Mobile #	3. Residential Address	4. Mobile #				
	5. Number of Children		5. Number of Children				
6. Occupation	7. Unemployed <input type="checkbox"/>	6. Occupation	7. Unemployed <input type="checkbox"/>				
8. Name and Address of Employer		8. Name and Address of Employer					

PART 3. GUARDIAN INFORMATION (If applicable)

GUARDIAN		
1. Surname	a) Middle Name	b) Other Name
2. Marital Status	a) Single <input type="checkbox"/>	b) Married <input type="checkbox"/> c) Separated/Divorced <input type="checkbox"/>
3. Residential Address	4. Number of Children	5. Mobile #
6. Occupation	7. Unemployed <input type="checkbox"/>	
8. Name and Address of Employer		

PART 4. DECLARATION

I hereby declare that the information given by me is True and Accurate.

Applicants' Name

Applicants' Signature

Date

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PART 5. NAME AND ADDRESS OF REFEREE

Please provide details of one referee. He / She **MUST** be a Senior Member of the **University**.

REFEREE			
Name		Position	
Signature		Date	
Address			

The referee cited above may complete this portion.

I, Have
 known.....

Over a period of (Month(s)/Years(s)) and can confirm that He/hers comes
 from a financially disadvantaged background and needs financial assistance to support His/hers Education.