

KNUST SRC KETEWA BIARA NSUA(KBN) 2021/2022

PART 1. APPLICANT'S INFORMATION

1.a) Surname	b) First Nam	e	c) Other Name	(\$)
2. Date of Birth (dd/mm/yy)	3. Gender	4.Stude	nt ID #	5. Index Number
	Male: Female:			
6. Place of Birth	7. Town/Village/C	City of Residence	e 8. I	District/Region of Residence
9. Hall of Affiliation:	10. Year (eg. Level 1		ent Vodafone # :	12. Other mobile # :
13. E-Mail Address:	14. Religion/Relig Pentecost Church)		me (e.g. <i>Christianity/</i>	15. Current CWA
16. Programme	17. Colle	ege		sidential Address (Where you en school is in session).
19. Indicate the mode by which you ga	ained admission to the	University.		
a) Less Endowed Student b) Parallel Student c) Fee-Paying Student d) Regular Student e) Other				
20. Have you benefited from KBN bet	Fore?	21. A	are you on any Financi	al Support?
YES NO YES NO			NO	
If yes state the academic year you benefited.		· · · · · · ·		
			If yes give details of	the scholarship.
Name of Schools Attended	Pro	gramme offered	Perio	od of Attendance
22. SHS				
23. JHS				

PART 2. PARENT / GUARDIAN INFORMATION

FATHER		Check the box if Dec	ceased
1.Surname	a) Middle Name	b) Other Name	
2. Marital Status	a) Single	b) Married	c) Separated/Divorced
3. Residential Address		4. Number of Children	5. Mobile #
6. Occupation		7.Unemployed	
8. Name and Address of	Employer		

MOTHER		Check the b	ox if Deceased	
1.Surname	a) Middle Name	b) Other Nar	ne	
2. Marital Status	a) Single	b) Married	c) ,	Separated/Divorced
3. Residential Address		4. Number o	f Children	5. Mobile #
6. Occupation		7.Unemploy	ed	
8. Name and Address of	Employer			

DECLARATION OF STUDENT

I hereby certified that the facts set forth in the above application and any submitted materials are True and completed to the best of my knowledge. The administrators of the fund are hereby Authorized to make investigation on my financial and academic status.

Applicant's Name	
Applicant's Signature	
Date	

PART 3. NAME AND ADDRESS OF REFEREE

Please provide details of two referees who are Senior Members of the **University**. One of your referee must be your Head of Department (HOD).

REFEREE (A)	REFEREE (B)
Name	Name
Position	Position
Address	Address
Date	Date
Signature	Signature

PERSONAL STATEMENT

Your typed personal statement should include:

a) Your financial challenges you face in school.

It should be typed and not more than one page.

OFFICIAL USE ONLY

Name & Signature of Official

Date / Time

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