2022/2023

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SONSOL APPLICATION FORM

PART 1. APPLICANT'S INFORMATION

1. a) Surnameb) F		First Name		c) Other Name(s)			
2. Date of Birth (dd/mm/yy)	3.Gender Male: F			nt ID #	5. Inc	dex Nu	mber
6. a) Place of Birth/Region(e.g. Kumasi- Ashanti Region):		b) Residential Address		7.Nationality			
8. Religion/Religious group name (e.g. <i>Christianity/ Pentecost Church</i>)		9. Name of re	e of residence 10. Student Vodafone #		11. Other Mobile #		
12. Programme of Study 13. Duration of Programme							
14. College 15. Faculty		ulty	16. Department			17. Year/Level	
18. Indicate the mode by which you gained admission to the University. a) Regular Student b) Distance Learning							
19. Residential Address when school is in session.		20. Are you a scholarship/bu	<i>j j z</i>		Source: Date:	es state Source	

PART 2. PARENTS'/ GUARDIAN INFORMATION

FATHER	2	Check the box if Deceased	MOTHER	Check	the box if Deceased
1. Name			1. Name		
2. Marital	a) Single b)	Married c) Separated/Divorced	2. Marital Status	a) Single b) Married c) Separated/Divorced
Status					
3. Residentia	al Address	4. Mobile #	3. Residential Add	dress	4. Mobile #
		5. Number of Children			5. Number of Children

6. Occupation	7.Unemployed	6. Occupation	7.Unemployed	
8. Name and Address of Employer		8. Name and Address of Employer		

PART 3. STUDENT'S DECLARATION

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

Applicants' Name	Applicants' Signature	Date

PART 4. NAME AND ADDRESS OF REFEREE

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

REFEREE	
Name	Position
Address	Date

Signature & Stamp

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PART 5. FOR OFFICIAL USE ONLY

COMMENT
N A D / IF

NAME

.....

SIGNATURE

DATE

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