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SONSOL APPLICATION FORM

PART 1. APPLICANT`S INFORMATION								
1. a) Surname	b) First Name			c) Other Nam	ne(s)		
2. Date of Birth (dd/mm/yy)	3. Gender Male:	Female:	4. Student ID # 5. Index Number					
6. a) Place of Birth/Region Kumasi- Ashanti Region	b) Residential	b) Residential Address			7. Nationality			
8. Religion/Religious grues. (e.g. Christianity/ICGC, Chum		9. Hall of resid	ence	10. Stude	nt Vodafone #	11. O	ther Mobile #	
12. Programme of Study			13. Du	ration of Pr	rogramme			
14. College 15. Faculty		aculty	16. Department				17. Year/Level	
18. Indicate the mode by a) Regular St		ined admission to t		ersity.				
			re you a beneficiary of any arship/bursary? NO 21. If Yes st Source:			state;		
		113			Date: Amount:			
PART 2. PARENTS/ (GUARDIAN	INFORMATIO	N		mount.			
FATHER	Check the box	if Deceased	MOT	HER	Check the box	if Decea	used	
1. Name			1. Nam	e				
2. Marital a) Single b) M	Married c) Separ	ated/Divorced	2. Mari	tal Status	a) Single b) Mar	ried c) S	Separated/Divorced	
3. Residential Address	4. Mobile #		3. Resid	dential Addr	ress 4. M	Iobile#		
	5 Number of Cl	hildren	1		5 N	umbar (of Children	

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6. Occupation	7. Unemployed	6. Occupati	on	7. Unemployed					
8. Name and Address of	8. Name and Address of Employer			8. Name and Address of Employer					
DADE A SELECTION									
PART 3. STUDENT	Γ'S DECLARATION								
I hereby declare that the information given by me is True and Accurate.									
Applicant's	antura	Date							
Applicant s	Applicants' Sign	lature	Date						
PART 4. NAME AN	ND ADDRESS OF REFE	EREE							
Please provide de	etails of one referee. He/she MUS	ST be a Senior Men	mber of the Univer	esity.					
REFEREE									
KEFEKEE									
Name			Position						
Tvame			TOSITION						
Address			Date						
Signature & Starr	пр								
•••••									
PART 5. FOR OF	FICIAL USE ONLY								
		COMMENT							
			•••••						
••••••		••••••	••••••						
•••••									
NAME									
SIGNATURE			DAT	F					
SIGNATURE			DAI	<u> </u>					

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