



**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND
TECHNOLOGY**
SRC KETWA BIARA NSUA (KBN) BURSARY 2025/2026
APPLICATION FORM



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 # <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>		5. Index Number <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>	
6. Programme (e.g BSc. Statistics)		7. Year (e.g. 1st Year, 2nd Year etc.)		8. College (E.g CAFE, COS, CHS)			
9. Residential Address (Where you stay when school is in session).		10. Primary Phone Number:		11. Alternative Phone Number:			
12. E-Mail Address:		13. Current CWA		14. Religious Group (e.g Christian, Muslim, etc)			
15. Church: (e.g Pentecost, Methodist, ICGC etc.)		16. Town/Village/City of Residence		17. District/Region of Residence			
18. Indicate the mode by which you gained admission to the University. <div style="display: flex; justify-content: space-between; padding: 5px;"><div>a) Less Endowed Student <input type="checkbox"/></div><div>b) Parallel Student <input type="checkbox"/></div><div>c) Fee-Paying Student <input type="checkbox"/></div><div>d) Regular Student <input type="checkbox"/></div><div>e) Other <input type="checkbox"/></div></div>							
19. Have you applied for the 2025/2026 KNUST Bursary? <div style="display: flex; justify-content: space-around; padding: 5px;"><div>YES <input type="checkbox"/></div><div>NO <input type="checkbox"/></div></div>			20. Are you on any Financial Support? <div style="display: flex; justify-content: space-around; padding: 5px;"><div>YES <input type="checkbox"/></div><div>NO <input type="checkbox"/></div></div> <div style="margin-top: 5px;">If yes state the name of the scholarship below.</div>				
21. a) Name of SHS Attended.		b) Programme of Study		c) Period of Attendance		d) Who paid for your education and upkeep up to this level?	

PART 2. PARENT / GUARDIAN INFORMATION

FATHER.

MOTHER.

Check box if deceased <input type="checkbox"/>			Check box if deceased <input type="checkbox"/>		
1. Surname	a) Other Name(s)		1. Surname	a) Other Name(s)	
2. Marital Status	a) Married <input type="checkbox"/> b) Separated/Divorced <input type="checkbox"/>		2. Marital Status	a) Married <input type="checkbox"/> b) Separated/Divorced <input type="checkbox"/>	
3. Residential Address	4. Phone No.	5. Number of Children	3. Residential Address	4. Phone No.	5. Number of Children
6. Type of Occupation/Work	7. Unemployed <input type="checkbox"/>		6. Type of Occupation/Work	7. Unemployed <input type="checkbox"/>	

PART 3. STUDENT DECLARATION

*I hereby certify that the facts stated in the above application, as well as any submitted materials, **are true and correct to the best of my knowledge**. The fund administrators are therefore authorized to conduct an investigation into my financial and academic standing.*

Applicant's Name

Applicant's Signature

Date

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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 (Both a signature and an official stamp are strictly required. Missing either is grounds for disqualification)

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Follow the link to register online before submitting this application form. <https://bit.ly/KBNKNUST-Bursary26>

Alternatively, you can scan the QR Code to register.

