The Mico University College Alumni Association (MOSA)

**Application for Scholarship/Bursary**

**(Please read the instructions for applying on the reverse side of this Form)**

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| **PERSONAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FULL NAME | | |  | | | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | | |  |  | | | | | | | | | | | | | | |
|  | | | *Surname* | | | | | | | | | | | | | | | | |  | *First* | | | | | | | | | | | | | | | |  | *Middle* | | | | | | | | | | | | | | |
| HOME ADDRESS | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| CONTACT INFORMATION | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | |  | |  | | | | | | | | | | |
|  | | | *e-mail address* | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | *Telephone No. (Home)* | | | | | | |  | | *Telephone (Cell)* | | | | | | | | | | |
| DATE OF BIRTH | | |  | | | | / |  | | | | | / | | | |  | | | | | |
|  | | | *Day* | | | |  | *Month* | | | | |  | | | | *Year* | | | | | |
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| **YOUR COLLEGE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IDENTIFICATION NO. | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DATE OF ENTRY TO THE MICO | | | | |  | | | / |  | | | | | | | / | |  | | | | |  | | EXPECTED DATE OF GRADUATION | | | | | | | | | | | | | | | | | |  | / | | |  | | | / |  | |
|  | | | | | *Day* | | |  | *Month* | | | | | | |  | | *Year* | | | | |  | |  | | | | | | | | | | | | | | | | | | *Day* |  | | | *Month* | | |  | *Year* | |
| FACULTY | |  | | | | | | | | | | | | | | | | | | | | |  | DEPARTMENT | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| PROGRAMME | |  | | | | | | | | | | | | | | | | | | | | |  | SPECIALIZATION (If any) | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| GRADE POINT AVERAGE | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list below Extra Curricular Activities / Community Service | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SCHOLARSHIP INFORMATION and FUTURE PLANS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name the Scholarship in which you are interested | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you currently a scholarship/bursary/grant recipient? | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If “YES” Please give details | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Give the Names and Contact Information of two Referees., one should be a lecturer at The Mico University College | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Referee Information | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Referee Information | | | | | | | | | | | | | | | | | | | | |
| NAME |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | |
| ADDRESS |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | |
| TELEPHONE NO. |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | |
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| **OTHER INFORMATION AND DECLARATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How did you hear about the scholarship | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I declare that the information provided in this application is true and accurate. I also agree that the University College has permission to contact the Referees given for further information. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Signature of Applicant* | | | | | | | | | | | |  | | | *Date* | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | |  |  | | | | | |
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| *Signature of Officer receiving application* | | | | | | | | | | |  | | | *Date Application Received.* | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | |  | | |  | | | |
| **This Application must be submitted along with a one page autobiography and evidence to support the application including achievements, participation in extracurricular or community activities and financial need.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **FOR OFFICIAL USE ONLY.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please indicate whether the information given is verified. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADMISSIONS DEPARTMENT  *Comments* | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Signature* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | *Date* | | | |  | |  | | | | | | | |
| EXAMINATIONS DEPARTMENT  *Comments* | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Signature* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | *Date* | | | |  | |  | | | | | | | |
| ACCOUNTS DEPARTMENT  *Comments* | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Signature* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | *Date* | | | |  | |  | | | | | | | |

**Information for Applicants**

This form has been designed to determine students deserving of a scholarship, bursary or grant. Based on the information provided and the verification thereof, persons will be shortlisted and interviewed, before an award is granted. Please therefore be fulsome in your response, and provide the necessary supporting documentation.

All awards, be it a scholarship, bursary or a grant shall be for a period of one academic year only. For the award to be extended for more than one period, the awardee shall ensure that a high performance is maintained, there is involvement in the institution and/or the community, and there is no change to financial standing.

The Award may be issued to students who attend in the evening, in the day or are graduate students.

Applicants shall

* Be a current student at The Mico University College
* Complete the Application Form and submit within the times specified, to the MOSA Office
* a one page autobiography
* evidence to support the application, including achievements, participation in extracurricular or community activities and financial need.
* Not hold any concurrent scholarship, bursary or grant.
* Maintain a grade point average (GPA) of 3.0 each year. If the GPA is less than 3.0, the award will be forfeited.
* Advice the MOSA Office of any withdrawal from the institution, as a withdrawal will result in the cancellation of the award.
* State the funds, if any , owed to the institution