

# VICE-CHANCELLOR'S SCHOLARSHIP FUND (VCSF) APPLICATION FORM

## PART A – APPLICATION TYPE

Total Estimated Amount Requested: GHS \_\_\_\_\_

Programme Duration (in years): \_\_\_\_\_

**Scholarship/benefit type/category: (Indicate the appropriate Category)**

Category of benefit (Please tick (✓) as appropriate)	Percentage Required (1%-100%)
<input type="checkbox"/> University fees	<input type="text"/>
<input type="checkbox"/> Accommodation fees	<input type="text"/>
<input type="checkbox"/> Books and other learning materials	<input type="text"/>
<input type="checkbox"/> Feeding	<input type="text"/>
<input type="checkbox"/> Other living allowances	<input type="text"/>
<input type="checkbox"/> Others (state).....	<input type="text"/>

## PART B - PERSONAL INFORMATION

Title: Mr/Miss/Mrs: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth \_\_\_\_\_

Marital Status:    Single                       Married                       Divorced

Name of Spouse: \_\_\_\_\_

Occupation: \_\_\_\_\_

Student Index Number: \_\_\_\_\_ Year of Entry: \_\_\_\_\_

Mode of Entry (Direct/ Mature): \_\_\_\_\_

Programme of Study: \_\_\_\_\_

Faculty: \_\_\_\_\_

Hall: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Contact Telephone No: \_\_\_\_\_

Type of benefit or scholarship enjoyed or applied for: \_\_\_\_\_

Any other scholarships applied for or held by applicant \_\_\_\_\_

Names and contact details (including telephone numbers) of five most prominent relatives or persons close to you or your family (Do not include your parents or guardians):

SN	Name	Postal and email Addresses	Telephone Number	Occupation/ Profession/ Trade	Relationship
1.					
2.					
3.					
4.					
5.					

  
**Father**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ If dead, state date or year of death \_\_\_\_\_

Postal Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Contact Phone No: \_\_\_\_\_

Occupation/Profession/Trade: \_\_\_\_\_

Academic/Professional qualifications: \_\_\_\_\_

Employer's name, address and telephone number: \_\_\_\_\_

Job title/rank/position: \_\_\_\_\_

Estimated annual income (**in GHS**): \_\_\_\_\_

Social Status (e.g. chief, family head, opinion leader, etc): \_\_\_\_\_

Number of dependents: Wife/wives \_\_\_\_\_ Children \_\_\_\_\_ Others \_\_\_\_\_

Major assets (land, buildings, equipment, car, bicycle, vehicles, etc.): \_\_\_\_\_

Any other relevant information about your father \_\_\_\_\_

**Mother**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ If dead, state date or year of death \_\_\_\_\_

Postal Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Contact Phone No: \_\_\_\_\_

Occupation/Profession/Trade: \_\_\_\_\_

Academic/Professional qualifications: \_\_\_\_\_

Employer's name, address and telephone number: \_\_\_\_\_

Job title/rank/position: \_\_\_\_\_

Estimated annual income (**in GHS**): \_\_\_\_\_

Social Status (e.g. chief/queen mother, family head, opinion leader, etc): \_\_\_\_\_

Number of dependents: Husband \_\_\_\_\_ Children \_\_\_\_\_ Others \_\_\_\_\_

Major assets (land, buildings, equipment, car, bicycle, vehicles, etc.): \_\_\_\_\_

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Any other relevant information about your mother \_\_\_\_\_

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**Guardian** *(This portion should be filled by applicants sponsored by persons who are not their parents)*

Any other relevant information about your guardian

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

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Contact Phone No: \_\_\_\_\_

Occupation/Profession/Trade: \_\_\_\_\_

Academic/Professional qualifications: \_\_\_\_\_

Employer's name, address and telephone number: \_\_\_\_\_

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Job title/rank/position: \_\_\_\_\_

Estimated annual income (**in GHS**): \_\_\_\_\_

Social Status (e.g. chief, family head, opinion leader, etc): \_\_\_\_\_

Number of dependents: Wife/wives \_\_\_\_\_ Children \_\_\_\_\_ Others \_\_\_\_\_

Major assets (land, buildings, equipment, car, bicycle, vehicles, etc.): \_\_\_\_\_

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Any other relevant information about your guardian \_\_\_\_\_

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## **PART E - PERSONAL STATEMENT**

(To be addressed to the Chairman, Vice-Chancellor's Scholarship Committee, University of Education, Winneba).

- Please write on separate sheet (s) of paper information about yourself (your socio-economic and educational details) to afford an assessment of your suitability for this award. Your personal statement should not be more than 500 words and should cover the following:
- Explain your reason for choosing your course of study.
- What societal challenge(s)/problem(s) do you want to solve in the future?
- Explain the financial challenges facing your studies/career including a self-assessment/evaluation of your financial need.
- What makes it difficult or impossible for your parent(s)/guardian to finance your education at the University?
- State the places you have lived.
- Occupation, if any (before you became a student)
- Your future plans: State your vision and the impact of your vision on Ghanaian's economy and the world at large.

## **PART F - DECLARATION BY APPLICANT**

To be completed and signed by applicant personally.

I, \_\_\_\_\_, hereby declare that the information provided is correct. I agree that any false declaration in this application will result in the refund of any monies paid to me under the VCSF. In addition, disciplinary and legal actions may be taken against me for making false declaration.



Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## PART G - DECLARATION BY REFEREES

***This section must be completed by two referees one of whom MUST be in an Academic position (Head of your former school or Head of Department) and the other a respected member of society such as a Senior Public Servant or Priest who has known you for at least two (2) years.***

I can confirm that the applicant comes from a poor financial background and needs financial support for his or her education. I therefore support his/her application for the VCSF scholarship.

REFEREE 1	REFEREE 2
Name: _____ Address: _____ _____ _____ _____ Position/Rank: _____  Telephone Number: _____ No. of years applicant known: _____ Reasons for your recommendation:	Name: _____ Address: _____ _____ _____ _____ Position/Rank: _____  Telephone Number: _____ No. of years applicant known: _____ Reasons for your recommendation:
Signature and Date: _____	Signature and Date: _____
Official Stamp: 	Official Stamp: 

**PART H - FOR OFFICIAL USE ONLY**

**Coordinator's comments with signature and date:**

**SC's comments with signatures of all members and date:**

**MB's comments with signatures of all members and date:**