



GRACELAND FOUNDATION FOR HUMAN DEVELOPMENT

Partner in personal and intellectual development

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STUDENT'S SCHOLARSHIP SCHEME (TERTIARY INSTITUTIONS)

Upload a recent
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APPLICATION FORM

Name: _____

Date of Birth _____ Sex: Male () Female ()

Nationality _____ State of Origin _____ Home Town _____

Mobile: _____ Email: _____

Name of Institution _____

Course of study: _____

Department: _____ Faculty/School: _____

Level: _____ Reg./Matric No: _____

Current CGPA: _____

Current University residence address: _____

Permanent home address: _____

Father's name: _____ Phone No: _____

Mother's name _____ Phone No: _____

Is your family Monogamous or Polygamous? _____

Are your Parents: Living Together () Separated () Divorced ()

Number of Children in the Family _____ Your Position among the Children _____

Religion _____ If Christian, which denomination/Church? _____

Why do you need the scholarship? _____

Signature: _____ Date: _____

Note: Applicant must submit along with their application form (a) Letter of motivation explaining why you need the scholarship (maximum of 250 words) (b) Letter of recommendation for the Head of Department confirming your studentship (c) Current ID of the institution