

1. PARTICULARS OF APPLICANT

SURNAME: _____

FULL NAMES: _____ KNOWN AS: _____

HOME ADDRESS: _____

POSTAL ADDRESS: _____

EMAIL ADDRESS: _____

CONTACT NUMBER: _____

DATE OF BIRTH: _____ IDENTITY NUMBER: _____

CITIZENSHIP: _____ PLACE OF BIRTH: _____

HOME LANGUAGE: _____ OTHER LANGUAGES: _____

MARITAL STATUS: _____ NR. OF DEPENDENTS: _____

PRESENT STATUS (Please Tick Appropriate Box): Scholar Student Employee Other (please specify)
 Other: _____

NAME OF PARENTS OR GUARDIAN IF MINOR: _____

ADDRESS OF PARENTS OR GUARDIAN: _____

CONTACT DETAILS OF PARENTS OR GUARDIAN: _____

OCCUPATION OF PARENTS OR GUARDIAN: _____

GIVE PARTICULARS OF DISABILITIES OR ANY ILLNESS YOU ARE SUFFERING FROM:

2. INTERESTS

HOBBIES: _____

READING MATTER: _____

EXTRAMURAL ACTIVITIES EG. CHESS, TENNIS, ETC.

ACTIVITY	TEAM	COMMENTS

3. ACADEMIC RECORDS

NAME OF SCHOOL: _____

TYPE OF SCHOOL: Academic Technical Commercial Agricultural

SUBJECTS PASSED: **GRADE 10** YEAR PASSED: _____

<i>Subjects</i>						
<i>NSSCO</i>						
<i>NSSCH</i>						
<i>Results</i>						

IF OTHER THAN NSSCO OR NSSCH, PLEASE SPECIFY:

GRADE 11

YEAR PASSED: _____

<i>Subjects</i>							
<i>NSSCO</i>							
<i>NSSCH</i>							
<i>Results</i>							

IF OTHER THAN NSSCO OR NSSCH, PLEASE SPECIFY:

GRADE 12

YEAR PASSED: _____

<i>Subjects</i>							
<i>NSSCO</i>							
<i>NSSCH</i>							
<i>Results</i>							

IF OTHER THAN NSSCO OR NSSCH, PLEASE SPECIFY:

4. INTENDED STUDY DETAILS

INTENDED FIELD OF STUDY: _____

AT WHICH UNIVERSITY WOULD YOU PREFER TO STUDY? _____

DURATION OF STUDIES: _____

ACCOMMODATION: Hostel Private (Please tick appropriate box)

FIRST YEAR OF STUDY: _____ EXPECTED YEAR OF COMPLETION OF STUDY: _____

FIRST YEAR SUBJECTS	YEAR	RESULTS	SECOND YEAR SUBJECTS	YEAR	RESULTS

