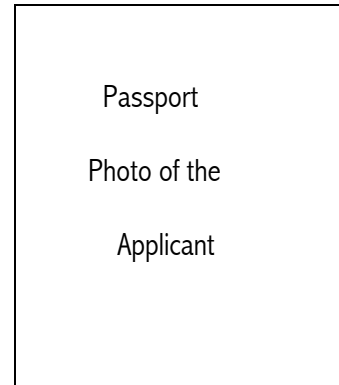




KAREN & EDWARD ADEBANJO EDUCATION WELFARE AND SCHOLARSHIPS FOUNDATION (KAEAWSF)
Lagos, Nigeria

Scholarships for undergraduate students in Nigerian Federal & States Universities

APPLICATION FOR ACADEMIC YEAR 2025/2026 SCHOLARSHIP AWARDS

The completed form should be submitted to the email below:

Email: kaeawsf@gmail.com

NOTES:

- a.** Any false information used to secure this scholarship will be discovered and, in effect, lead to the withdrawal of the scholarship.
- b.** All information supplied must be supported by relevant documents, including your birth certificate and valid ID.
- c.** One passport photo of your parent or guardian must be pasted on to the consent form.
- d.** Staple One passport photograph of yourself into the box at the top of this form.
- e.** The passport photograph must be endorsed by one of your referees.
- f.** Your scholarship will be withdrawn if your grades fall below Second Class lower (2-2).

PART 1. This section is to be completed by the applicant

A. Personal Data

1. Name in full (Mr/Mrs/Miss): _____
2. Date of birth: _____ Mobile No: _____
3. Address: _____
4. Email address: _____
5. University: _____
6. Course: _____ Year: _____

B. Parent Data:

1. Name in Full (Mr/Mrs): _____
2. Occupation: _____ Age: _____
3. Work Address: _____
4. Annual Income: _____
5. Any Other Income: _____

C. Academic Achievements

Give as much detail as would promote your application such as honours or awards

Post-secondary School Education

Name of Institution	Certificate/Grades	Date Attained

Secondary School Education

Name of School: _____

Attended from: _____ (Month/Year). To: _____ (Month/Year)

Subjects	Grades	Subjects	Grades

Copies of supporting documents must be attached

Signature: _____ Date: _____

D Your Experience

In three paragraphs of not more than five sentences each, discuss how you hope to attain your personal development goals.

[illegible]

Continue overleaf or on a separate sheet, or type your essay and paste here

[illegible]

5

Part 2 The section is to be completed by THREE different REFEREES

1. To be completed by your Lecturer/Teacher – First Referee

Name: _____

Role/Activity in School: _____

Character reference on the applicant:

Recommendation, stating why this applicant is deserving of scholarship:

Signature: _____

Date: _____ Mobile No: _____

2. To be completed by your Pastor, aged 40 years or over – Second Referee

Name:

Church:

Age:

Relationship with applicant:

Character reference on the applicant:

Recommendation, stating why this applicant is deserving of scholarship:

Signature:

Date:

_____.

Mobile No:

3. To be completed by your character reference – Third Referee

Name: _____

Profession: _____

Work Address: _____

Relationship: _____

Character reference on the applicant:

Recommendation, stating why this applicant is deserving of scholarship:

Signature: _____

Date: _____

Mobile No: _____

CONSENT FORM

Passport
Photo of your
Parent or Guardian

Name: _____

Address: _____

Relationship with applicant: _____

I hereby give my consent for my child/ward to obtain the KAEAEWSF SCHOLARSHIP

Signature: _____

Date: _____ Mobile No: _____