



Affix
passport
photograph

GLOBAL YOUTH LEADERSHIP AND GIRL-CHILD FOUNDATION

SCHOLARSHIP APPLICATION FORM

Please complete the information below and check all that apply:

Student's Full Name: _____

Address: _____

Age: _____

Sex: _____

Name of School: _____

Present Class: _____

Who's responsible for your education? _____

Next Class/When _____

Why do you need the scholarship? _____

What do you need it for? _____

How much do you need? _____

For how long? _____

Do you need a mentor? _____

What do you hope to gain from a mentor? _____

What is your long term goal? _____

How do you hope to achieve it? _____

In/Out of School: _____

Name of School Principal: _____

Telephone: _____

If Out of School, State Your Reasons:

(i) _____

(ii) _____

(iii) _____

Phone Number: _____

E-mail address: _____

Whatsapp: _____

Name of Both Parents/Guardian

Address: _____

Telephone: _____

Educational Qualification of Parents: (a) _____

(b) _____

Reference (1) Name: _____

Occupation: _____

Relationship: _____

Email: _____

Phone no/WhatsApp: _____

Reference (2) Name: _____

Occupation: _____

Relationship: _____

Email: _____

Phone no/WhatsApp: _____

Please submit photocopies of your academic performance (report cards).

Student Sign

Date

NB: Filling this form is NOT an assurance of scholarship from GYLG. All information shall be duly verified, any information that is NOT true WILL disqualify your application. Only Nigerian **GIRLS** in secondary school are eligible.