A 2024



MRC-Holland Foundation, Scholarship Office, Off Brufut Highway, Brusubi SCHOLARSHIP APPLICATION FORM FOR GRADE 12 GRADUATES ONLY Submission date: MRCH NO: 2024 A-Please note: this form is for grade 12 graduates (2022 to 2024 only), who wish to continue their education in the Gambia. Completed forms in BLOCK LETTERS and in the applicant's own hand writing should be submitted to the MRCH focal point at the Regional Education Offices or to the MRCH Scholarship Office in Brusubi. The following categories will be given priority: Students graduating from Rural Senior Secondary Schools Students choosing rural institutions Students who want to become technical teachers Science & Technical students. 2.0 PERSONAL DETAILS 2.1 Name of applicant as evident in all certificates. Middle name First name Surname 2.2 Nationality _____ 2.3 Gender Male / Female 2.4 Date of birth ______ place of birth ______ in region: _____ 2.5 Permanent address: 2.6 Telephone number(s): _____ 2.7 E-mail address: 2.8 Do you have any form of disability? YES or NO (please circle as appropriate) 2.9 If yes, please give details of your disability: 3.0 PARENTAL DETAILS 3.1 Name of father: ______ 3.2 Nationality ______ 3.3 Occupation: 3.4 Address: ______ 3.5 Telephone no: _____ 3.6 Name of mother: _____ 3.7 Nationality _____ 3.8 Occupation:

3.9 Address: ______ 3.10 Telephone no: _____

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4. EDUCATION BACK GROUND (Please state all educational institutions you attended).

YPE	SCHOOL/ INSTITUTION	N	REGION	START DATE	FINISH DATE	QUALIFICATON OBTAINED:	
BS							
IBS							
SS							
ther							
6. INTENDED COURSE/ PROGRAM OF STUDIES – THIS SHOULD BE THE SAME AS IN YOUR ATTACHED ACCEPTANCE LETTER, and cannot be changed after award has been given: Institution SUBJECTS YOU INTEND TO LEVEL (eg. Diploma, BEd, BSc, Masters, etc) MAJOR:							
		MINOR: (where applica	able)				
	Are you currently be Have you applied to If yes to either of the	nefiting from a any other spor	any form of spo nsor? ons, please pro	nsorship? vide the follo	YES YES owing:	/ NO / NO	
	Telephone no:						
	reichtione 110.		[]	iuii			

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8. STATE THE REASONS FOR CHOOSING TH	IS SUBJECT AREA
9. PLEASE PROVIDE ANY RELEVANT INFOR	RMATION IN SUPPORT OF YOUR APPLICATION
	<u>.</u>
10. IMPORTANT INFORMATION:	
A copy of your WASSCE results, with an original control of the copy of your WASSCE results, with an original control or copy of your waste or copy	e or Passport copy) wish to study stating subject, duration and fees ginal stamp and signature from the school principal.
 Recently taken passport size photo (please 	write your name at the back)
11. DECLARATION	
I hereby declare that the above stated informat authentic and complete and any false/misleadir of the sponsorship but may also lead to legal ac	ng information will not only result in the cancellation
Applicants Signature:	Date:
Parents Signature:	Date: