



### **AKANCHAWA EDUCATION FOUNDATION**

In collaboration with

Sebastian Onwuzurike Foundation

# **ATTESTATION FORM**

| Applicant's Name:                            |  |
|--|--|
|  | support the pplicant. I write to state that I know the applicant and I eeds for the scholarship. |
| I highly recommend the applicant for the Aka | anchawa Scholarship.   |
| Signature                                    | <br>Date   |
| Title/Position                               |  |

\*\*\*\*Applicants please append your passport/portrait photo here.



# SCHOLARSHIP PROGRAMME SPONSORED BY

#### **AKANCHAWA EDUCATIONAL FUND**

(Sebastian Onwuzurike Foundation)

| Na                     | me of Applicant        | <u>.</u>            |           |         |              |  |
|------------------------|------------------------|---------------------|-----------|---------|--------------|--|
| Current Institution of |                        |                     |           |         |              |  |
| study                  |                        |                     |           |         |              |  |
| Fac                    | culty/Dept. of Study   |                     |           |         |              |  |
| Level of Study         |                        |                     |           |         |              |  |
| Cui                    | rrent Address          |                     |           |         |              |  |
| Coı                    | ntact Tel No           |                     | Email     |         |              |  |
| ĺ                      |                        |                     | address   |         |              |  |
| Se                     | lection Criteria Eva   | <b>luation Scor</b> | res       |         |              |  |
|                        | Selection criteria     |                     | weight    | Score   | Actual Score |  |
|                        |                        |                     |           | Range   |              |  |
| 1                      | Academic Performan     | ce(0-5)             | 35%       | 0 -3.5  |              |  |
| 2                      | Inability to pay (0-3) |                     | 30%       | 0 -3    |              |  |
| 3                      | Interview (Oral/Exam)  |                     | 30%       | 0 -3    |              |  |
| 4                      | Other considerations   | <b>i</b>            | 5%        | 0 - 0.5 |              |  |
| _                      | Total                  |                     | 100%      | Max =10 |              |  |
| Eva                    | luators' Sign off      |                     |           |         |              |  |
|                        | Name                   |                     | Signature | Commen  | ts           |  |
| 1                      |                        |                     |           |         |              |  |
| 3                      |                        |                     |           |         |              |  |
| 4                      |                        |                     |           |         |              |  |
| 5                      |                        |                     |           |         |              |  |
| 6                      |                        |                     |           |         |              |  |
| 7                      |                        |                     |           |         |              |  |
| 8                      |                        |                     |           |         |              |  |
| 9                      |                        |                     |           |         |              |  |
| 10                     |                        |                     |           |         |              |  |

**Candidates Should Attach Relevant Documents and Results** 

# **Appendix 3: Results Summary Sheet**



## **SCHOLARSHIP PROGRAMME**

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| ·          |                   | Scores in descending order         |                              |                             |          |  |
|------------|-------------------|------------------------------------|------------------------------|-----------------------------|----------|--|
| No         | Name OF Applicant | Academic<br>Performance<br>(0-3.5) | Inability<br>to pay<br>(0-3) | Interview (Oral/Exam) (0-3) | Other    | Total  |
| 1          |                   |                                    |                              | -                           |          |  |
| 2          |                   |                                    |                              |                             |          | +  |
| 3          |                   |                                    |                              |                             |          |  |
| 4          |                   |                                    |                              |                             |          |  |
| 5          |                   |                                    |                              |                             |          |  |
| 6          |                   |                                    |                              |                             |          | +  |
| 7          |                   |                                    |                              |                             |          | +  |
| 8          |                   |                                    |                              |                             |          | +  |
| 9          |                   |                                    |                              |                             |          | +  |
| 10         |                   |                                    |                              |                             |          | <del>                                     </del> |
|            | EVALUATOR NAME    | SIGNAT                             | TURE                         |                             | COMMENTS |  |
| 1          |                   |                                    |                              |                             |          |  |
| 2          |                   |                                    |                              |                             |          |  |
| 3          |                   |                                    |                              |                             |          |  |
| <b>4 5</b> | -                 |                                    |                              | -                           |          |  |
| 6          | +                 |                                    |                              | +                           |          |  |
| 7          | +                 |                                    |                              |                             |          |  |
| 8          | 1                 |                                    | -                            |                             |          | -  |

#### SCHOLARSHIP/CAREER GUIDANCE SUB-COMMITTEE

| Chairman  | Foundation President |  |  |
|-----------|----------------------|--|--|
|           |                      |  |  |
| Secretary | Secretary            |  |  |