



LICEO DE CAGAYAN UNIVERSITY

FJPQ+CM7, Rodolfo N. Pelaez Blvd
Cagayan de Oro, 9000 Misamis Oriental

(SCHOLARSHIP TITLE))

(NAME OF COUNTRY WHERE TENABLE)

1. Name in full _____
(Surname) (Others)

2. Present mailing address _____

3. Present contact

(a) Telephone

(i) Landline: _____

(ii) Mobile Phone No. _____

(b) Permanent Address _____

(c) Email _____

4. Age _____ Date of Birth _____ Sex _____

5. County _____

District of Birth _____

Constituency _____

6. Employers Details (if applicable)

Name _____

Address _____

Telephone _____

Designation _____

7. Do you have any dependants? _____ if yes, who will Support them if you are offered a scholarship? _____
8. What course do you wish to study? _____
9. Proposed future profession in Kenya _____
10. Schools or college presently attending _____

11. Do you plan to sit for nay examination this year? _____
12. Have you applied for admission into any institution of higher learning in Kenya?

If yes, give details _____

13. Have you received a scholarship in the last two years? _____

If yes, state the sponsor and scholarship title _____

14. Institutions attended	Date	Qualification
(i) _____	_____	_____
(ii) _____	_____	_____
(iii) _____	_____	_____
(iv) _____	_____	_____
(v) _____	_____	_____

Note: Copies of academic certificates and testimonial must be attached.

Date:..... Signature of Applicant:.....