Oke-Ogun Progressive Association Scholarship Foundation, USA, Inc.
Tolani Ogundiran Scholarship Fund

Scholarship Application Form

Please type or write clearly in capital letters the information requested on this form.

Eligibility Criteria

1. Applicant must be an Oke-Ogun/Ibarapa indigene.
2. Applicant must have secured admission into an accredited Nigerian university or be a currently enrolled undergraduate.
3. Recent passport photograph.
4. JAMB admission letter or proof of current studentship.
5. Proof of Oke-Ogun/Ibarapa indigeneship.
6. Birth certificate or age declaration.
7. Copies of WAEC, NECO, GCE, or Equivalent certificates must be submitted with this application or it may be deemed incomplete.
8. A 300-word essay titled, “What I think can be done to develop Oke-Ogun” must accompany this application, otherwise it may be deemed incomplete.
9. The two referees must sign the application or it may be deemed incomplete.
10. Return completed application form and all the necessary documents to: assessment@opahome.org.

Note: Photo copies of this form properly filled and completed will be accepted.

Names in full: ……

Last Name *First Name* *Middle Name*

Home Address: ……

Email: ……

Whatsapp Number:

……

Date of Birth: ……./ ……./ ……. Place of Birth: ……

(Day - Month - Year)

Home Town: …… Local Govt. Area of Origin:

……

High School Attended:

……

Years: …… To ……..

Check One: (a) Currently a University student: ……. (Attach evidence of attendance)

(b) Just been admitted: …….. (Attach letter of admission)

Name of University:

……

Department/Program of Study:

……

Years of Study: …… Present Level: ……

Oke-Ogun Progressive Association Scholarship Foundation, USA, Inc.
Tolani Ogundiran Scholarship Fund

Degree in view and Expected Year of Completion:

……

Are You Currently on any Scholarship and/or Grant? Yes / No

If Yes, what is the amount?: …… Duration?: ……. Years/Months

Name of Awarding Body: ……

Address: ……

Names of Parents:

a. Father: …… Place of Birth: ……

Address: …… Tel No: ……

Occupation: ……

b. Mother: …… Place of Birth: ……

Address (if different from father's): …… Tel No:

……

Occupation: ……

References from Òkè-Ògùn (at least, one must be a resident indigene of your Town or Local Government Area)

1 Name: …… Place of Birth: ……

Address: ……

Occupation: …… Tel No: ……

2 Name: …… Place of Birth: ……

Address: ……

Occupation: …… Tel No: ……

Certification:

All the information on this application form is true and complete to the best of my/our knowledge. If required, I/we agree to give proof of this information. I/we realize that if this proof is not provided, the applicant may be deemed ineligible for this scholarship.

Referees:

1 Name: …… Signature: …… Date: ……

2 Name: …… Signature: …… Date: ……

Applicant:

Signature: …… Date: ……