



**MRS OIL NIGERIA PLC**

# SCHOLARSHIP APPLICATION FORM

To be completed by the child of MRS Oil Nigeria Plc Shareholder

Please affix one  
Passport Photograph  
(with white background)

## STUDENT INFORMATION (Please use capital letters)

Surname: \_\_\_\_\_ Other Names: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  Male  Female

Residential address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Nationality: \_\_\_\_\_ State of Origin: \_\_\_\_\_

Local Government (of residential address): \_\_\_\_\_

## ACADEMICS (For Secondary School Applicants Only)

School Name: \_\_\_\_\_ Class: \_\_\_\_\_

School Address: \_\_\_\_\_

Name / Contact Number of Principal: \_\_\_\_\_

Subjects And Grades:

Subjects	Grades	Subjects	Grades

## ACADEMICS (For Tertiary Applicants Only)

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Name / Contact Number of Head of Department: \_\_\_\_\_

CGPA (Not applicable for first year students): \_\_\_\_\_

## ENDORSEMENT

Signature: \_\_\_\_\_  
(Applicant)

\_\_\_\_\_  
Principal / Head of Department Signature, Stamp and Date

Date: \_\_\_\_\_ (Applicant)



# SHAREHOLDER'S INFORMATION

To be completed by the Parent of the Applicant

Please affix one  
Passport Photograph  
(with white background)

## SHAREHOLDER'S INFORMATION (Please circle as appropriate)

Shareholder's Surname: \_\_\_\_\_ Other Names: \_\_\_\_\_

Shareholder's Registered Number: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
\_\_\_\_\_

Mobile Number: \_\_\_\_\_

Valid ID Card Number (International Passport, Driver's License, Voter's card or NIM):

\_\_\_\_\_ (Copy of the ID to be submitted along with the form)

## ATTESTATION

\*I declare that the content of this form are true in substance and in fact and that I fully understand the meaning thereof and I am willing to submit supporting documentation.

\*I understand that any falsification, omission or concealment of material fact to this application will subject me to investigation by the relevant authorities and my child(ren) would cease to be eligible for the scholarship.

## ENDORSEMENT

Parent's Signature:

Date: \_\_\_\_\_