



**MODUPE MORIRE
LOVE FOUNDATION**

WAEC/ NECO SCHOLARSHIP REFERENCE FORM

INSTRUCTIONS (Please read carefully)

- This form should be completed and signed by the referee only.
- The referee should be a community/traditional leader, lecturer, teacher, head of religious institution, or a public servant at Grade Level 10 and above.
- Send completed form via email lovefoundationm@gmail.com or online at scholarships@

SCHOLARSHIP CATEGORY (select only one option)

WAEC ☐ **NECO** ☐

REFEREE NAME:

APPLICANT NAME:

RELATIONSHIP WITH APPLICANT:

OCCUPATION:

ORGANIZATION:

PHONE NUMBER:

EMAIL:

CONTACT ADDRESS:

DECLARATION

I, (Your names) hereby express my support for
..... (Applicant Name) in his/her application for
the **Modupe Morire Love Foundation WASC/NECO SSCE** scholarship application. I have known the
applicant for years and can attest to his/her record of academic, diligence and assert
that he/she is of good character and deserving of this scholarship opportunity.

I understand that the **MODUPE MORIRE LOVE FOUNDATION**, through her employees or
representatives, may contact me to verify my identity and/or the information provided in the form
before deciding on his/her scholarship application.

FULL NAME:

DATE:

SIGNATURE: