



**MODUPE MORIRE
LOVE FOUNDATION**

WAEC/ NECO SCHOLARSHIP APPLICATION FORM

INSTRUCTION (Please read carefully)

- Complete all sections of this application form
- Incomplete forms will not be processed for this scholarship opportunity
- The reference section should be completed and signed by the referee only
- Send completed form lovefoundationm@gmail.com with your name and scholarship category as the email subject.

AFFIX PASSPORT

PHOTO

SCHOLARSHIP CATEGORY (select only one option)

WAEC ☐ **NECO** ☐

APPLICANT BIO-DATA

FIRST NAME:

LAST NAME:

DATE OF BIRTH:

GENDER: MALE FEMALE

STATE OF ORIGIN:

LOCAL GOVERNMENT:

RESIDENTIAL ADDRESS :

ACADEMIC RECORD (Enter all your results from the most recent academic session)

SCHOOL NAME:

SUBJECT/ COURSES		SCORE/GRADE
1	ENGLISH LANGUAGE	
2	MATHEMATICS	
3		
4		
5		
6		
7		
8		
9		
10		
11		



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Academic History

(List all schools attended in the last six years, starting with your current school)

	SCHOOL NAME & SCHOOL ADDRESS	CLASSES ATTENDED	YEARS OF ATTENDANCE
1			
2			
3			
4			
5			
6			

PREFERRED EXAMINATION CENTRE: (write in the below column)

NAME OF EXAMS CENTRE:

DECLARATION

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that the information provided here is subject to verification by the Modupe Morire Love Foundation and agree to produce copies of relevant documents in support of this application as may be requested. I also authorize the schools, academic institutions, examination bodies and personal references listed in this application to provide the Modupe Morire Foundation through her employees or representatives, with any relevant information that may be sought in connection with this application. I understand that any misrepresentation or omission of a material fact in my application may disqualify me from being considered for this scholarship selected for this scholarship. I understand that the Modupe Morire Love Foundation may publish my name as a beneficiary on her website and other publications.

FULL NAME:

DATE:

SIGNATURE: