



Central Aid

A human development-oriented nonprofit agency of the International Central Gospel Church

Affix Your
Passport
Picture
Here

APPLICATION FOR FINANCIAL AID FOR FIRST YEAR STUDENTS OF CENTRAL UNIVERSITY

1. Provide all the information requested. Incomplete information could delay the processing of your application.
2. Provide ALL the following supporting documents with your application:
 - a. A letter of application in your own handwriting of not more than 300 words, explaining why you should be awarded financial aid.
 - b. A certified copy of your Admission Letter to pursue an academic programme at Central University.
 - c. A certified copy of your tuition fee for the 2019/2020 academic year.
 - d. A certified copy of your WASSCE results

Please note that any false information you give will result in the rejection of this application; or if detected after the financial assistance is given, it would be withdrawn.

COMPLETED APPLICATION FORMS AND SUPPORTING DOCUMENTATION MUST BE SUBMITTED TO ANY OF THE FOLLOWING ADDRESSES NOT LATER THAN **5TH JULY 2019:**

1. **By Post:** The Executive Director, Central Aid, P. O. Box CU4, Miotso
2. **By Hand:** The Central Aid Secretariat, ICGC Head Office (located on Central University campus at Miotso)
3. **By Email:** admin@centralaidgh.org OR diana.asante@centralgospel.com

Application Forms can be completed and submitted online at www.centralaidgh.org

PLEASE DO NOT SUBMIT YOUR COMPLETED APPLICATION FORMS TO ANY ICGC ASSEMBLY OR POST THEM AS REGISTERED MAIL.

A. YOUR PERSONAL INFORMATION

1. Surname (CAPITALS)
First Name..... Other Name (if any).....
2. Date of Birth.....
3. Place of Birth Region.....
4. Home Town..... Region.....
5. Current Place of Residence..... Region.....
6. Postal Address.....
7. E-mail Address.....
8. Telephone Contact(s)...../.....

B. YOUR FAMILY INFORMATION

1. Tick where applicable. Provide further information as requested:
 - a) Father: Alive Dead (in which year?)
 - b) Mother: Alive Dead (in which year?)
2. Who currently pays for your education? (please tick)
 - a) Parents Guardian Other (please tick)
 - b) Name(s).....
 - c) Telephone contact(s)/.....
3. How many siblings do you have?
4. How many of your siblings are employed or working?
5. How many of your siblings are currently in school? (please indicate the number)
 - a) Basic level
 - b) Secondary level.....
 - c) Tertiary level.....
6. Who currently pays for your siblings' education? (please tick)
 - a) Parents
 - b) Guardian
 - c) Other

C. YOUR ACADEMIC INFORMATION

1. Faculty/school.....
2. Programme/course of study.....
3. Expected year of completion
4. Tuition fee for the 2019/2020 academic year

D. FOR ICGC MEMBERS ONLY

1. What is the name and location of your ICGC Assembly?
.....
2. In which year did you become a member of ICGC?
3. Do you belong to any Ministry or play any role in the church? Yes No
If yes, state the Ministry and/or the role you play

Endorsement by your Pastor

I confirm that (name of the applicant) has been a recognized member of (name of ICGC Assembly) for the past years

- a) Name of Pastor

Central Aid financial assistance covers part of the tuition fees for the 2019/2020 academic year

Profession/Occupation.....
Address.....
Tel. contact..... Signature..... Date.....

CHECKLIST

Tick each box to indicate that you have attached to this Application Form the requested information/document:

- One passport-size picture
- Letter of application in your own handwriting
- Evidence of your membership of ICGC (for ICGC members **only**)
- Certified copy of your CU Admission Letter
- Certified copy of your tuition fees
- Certified copy of your WASSCE results

**ANY APPLICATION FORM THAT IS INCOMPLETE OR WITHOUT
THE REQUISITE DOCUMENT(S) ATTACHED WILL NOT BE PROCESSED**

(Executive Director)