



**KAREN & EDWARD ADEBANJO EDUCATION WELFARE AND SCHOLARSHIPS FOUNDATION (KAEAWSF)**  
**Lagos, Nigeria**

**Scholarships for undergraduate students in Nigerian Federal & States Universities**

**APPLICATION FOR ACADEMIC YEAR 2025/2026 SCHOLARSHIP AWARDS**

The completed form should be submitted to the email below:

Email: [kaeawsf@gmail.com](mailto:kaeawsf@gmail.com)

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**NOTES:**

- a.** Any false information used to secure this scholarship will be discovered and, in effect, lead to the withdrawal of the scholarship.
- b.** All information supplied must be supported by relevant documents, including your birth certificate and valid ID.
- c.** One passport photo of your parent or guardian must be pasted on to the consent form.
- d.** Staple One passport photograph of yourself into the box at the top of this form.
- e.** The passport photograph must be endorsed by one of your referees.
- f.** Your scholarship will be withdrawn if your grades fall below Second Class lower (2-2).

**PART 1. This section is to be completed by the applicant**

**A. Personal Data**

1. Name in full (Mr/Mrs/Miss): \_\_\_\_\_
2. Date of birth: \_\_\_\_\_ Mobile No: \_\_\_\_\_
3. Address: \_\_\_\_\_
4. Email address: \_\_\_\_\_
5. University: \_\_\_\_\_
6. Course: \_\_\_\_\_ Year: \_\_\_\_\_

**B. Parent Data:**

1. Name in Full (Mr/Mrs): \_\_\_\_\_
2. Occupation: \_\_\_\_\_ Age: \_\_\_\_\_
3. Work Address: \_\_\_\_\_
4. Annual Income: \_\_\_\_\_
5. Any Other Income: \_\_\_\_\_

**C. Academic Achievements**

*Give as much detail as would promote your application such as honours or awards*

**Post-secondary School Education**

Name of Institution	Certificate/Grades	Date Attained

**Secondary School Education**

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

Attended from: \_\_\_\_\_ (Month/Year). To: \_\_\_\_\_ (Month/Year)

Subjects	Grades	Subjects	Grades

*Copies of supporting documents must be attached*

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

## D Your Experience

*In three paragraphs of not more than five sentences each, discuss how you hope to attain your personal development goals.*

[illegible]

*Continue overleaf or on a separate sheet, or type your essay and paste here*

[illegible]

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**Part 2 The section is to be completed by THREE different REFEREES**

1. To be completed by your Lecturer/Teacher – First Referee

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

Role/Activity in School: \_\_\_\_\_

Character reference on the applicant:

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Recommendation, stating why this applicant is deserving of scholarship:

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Mobile No: \_\_\_\_\_

2. To be completed by your Pastor, aged 40 years or over – Second Referee

Name:

\_\_\_\_\_

Church:

\_\_\_\_\_

Age:

\_\_\_\_\_

Relationship with applicant:

\_\_\_\_\_

Character reference on the applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation, stating why this applicant is deserving of scholarship:

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\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_.

Mobile No:

\_\_\_\_\_

3. To be completed by your character reference – Third Referee

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

Profession: \_\_\_\_\_

Work Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Character reference on the applicant:

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Recommendation, stating why this applicant is deserving of scholarship:

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Signature: \_\_\_\_\_

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

Mobile No: \_\_\_\_\_



## CONSENT FORM

Passport  
Photo of your  
Parent or Guardian

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

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

Relationship with applicant: \_\_\_\_\_

I hereby give my consent for my child/ward to obtain the KAEAEWSF SCHOLARSHIP

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Mobile No: \_\_\_\_\_