



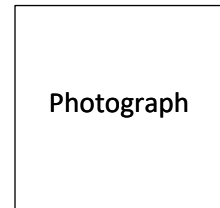
KANO STATE GOVERNMENT

OFFICE OF THE SECRETARY TO THE STATE GOVERNMENT

**Resumption of Postgraduate Scholarship for Kano State Indigenes with
First Class Honours Degree**

Application Form

Bio Data



Full Name:.....

DOB:..... Gender:..... Religion:.....

Residential Address:.....

Contact Address:.....

Phone Number:..... Email:.....

Local Government:..... State:.....

Next of Kin:..... GSM:.....

Academic Qualifications

First Degree:..... Grade obtained:.....

Schools Attended:.....

Year of Graduation:.....

O level Certificate

Name of School:.....

Year of Graduation:..... No of Credit Obtained:.....

WAEC

NECO

NABTEB

Parents

Father's Name:..... Occupation:.....

Contact Address:..... GSM:.....

Mother's Maiden Name:.....

Have you previously received scholarship from Kano State? Yes No

Are you expecting a scholarship this academic session? Yes No

Referees

(1)

Name:.....

Address:.....

Phone No:..... Email:.....

(2)

Name:.....

Address:.....

Phone No:..... Email:.....

(3)

Name:.....

Address:.....

Phone No:..... Email:.....