

**Application form for Orphan Child Scholarship****Student Information:**

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

Date of Birth: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

Application No. \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Program Applied for: \_\_\_\_\_

**Parent/Guardian Information:**

Full Name of Parent/Guardian: \_\_\_\_\_

Contact Number of Parent/Guardian: \_\_\_\_\_

Email Address of Parent/Guardian: \_\_\_\_\_

Address of Parent/Guardian: \_\_\_\_\_

\_\_\_\_\_

Annual Income: \_\_\_\_\_ Number of Dependents (Including Applicant): \_\_\_\_\_

**Please attach the following documents with your application:**

- Proof of Single Parent Status (e.g., Death Certificate, Divorce Decree)
- Income Proof/Certificate
- Any other relevant supporting documents

**Declaration:**

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false information may result in the rejection of my application or withdrawal of any awarded scholarship.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** Please ensure all information is filled out accurately and completely. Incomplete applications may not be considered for the scholarship.