

Samuel Ogoazi Memorial Scholarship

DMGS Scholarship Foundation, Inc.

Scholarship Application 2023-2024

Application Deadline: July 15, 2023

Directions

The deadline for application for this scholarship is **July 15**. In addition to the application, you must attach the required documents. Return the application form and documents by email to: Ogoazi@dmgsscholarship.org.

SECTION 1

Student's Name (First, Middle, Surname) _____

Parent's Name (First, Middle, Surname) _____

Student' Email Address _____ Student's phone number _____

Parent's Email Address _____ Parent's phone number _____

Are you currently receiving any other scholarships toward your education at DMGS, Onitsha or your present school, if not DMGS, from other sources? ___ Yes ___ No

SECTION 2

Please submit the following documents to the foundation online through Ogoazi@DMGSScholarship.org.

1. Academic reports from the Head Teacher/Headmaster/Head of your primary school
2. Letter of recommendation from any member of academic /administrative staff of your primary school
3. Letter of declaration from your parent(s)

SECTION 3

Student initial each of the following items.

___ To the best of my knowledge, the information provided in this form is true.

___ I understand that misrepresentation of fact in connection with this application, whenever discovered is sufficient cause, in and of itself for cancellation and refund of my scholarship.

___ I understand that if any change in my enrollment status, or other financial aid/scholarship occurs, my eligibility may change.

___ I understand that in applying for and/or accepting this scholarship, I give permission to DMGS Scholarship Foundation, Inc. and DMGS, Onitsha to release and/or announce a receipt of my scholarship in newspapers, school brochures, and other publications.

Student' Signature _____ Date _____

Parent's Signature _____ Date _____

DMGS SCHOLARSHIP FOUNDATION, INC.

Samuel Ogoazi Scholarship Foundation, Inc.

DMGSSCHOLARSHIP.ORG

2023-2024 Application

PARENT/GUARDIAN DECLARATION FORM

I, _____, parent/guardian of _____ (name of student), who is applying for a scholarship from DMGS Scholarship Foundation, Inc. hereby affirm that I am aware that my child is applying for a scholarship from your foundation, and that all information and document submitted with this application form are true to the best of my knowledge. I also agree that if, at any stage, it is found that any information or document given/submitted is fake or inaccurate, all scholarships awarded to me or my child by DMGS Scholarship Foundation, Inc. may be automatically withdrawn, and legal action as deemed fit may be taken against me/my child. In addition, I/my child will be automatically disqualified from this and any other scholarship from the foundation forever.

Student's Name _____

Student's Signature _____

Parent's Name _____

Parent's Signature _____