

**LATE CHIEF JOSEPH OLANIPEKUN POPOOLA &  
LATE CHIEF MRS VERONICA MODUPE POPOOLA  
MEMORIAL SCHOLARSHIP AWARD  
APPLICATION FORM**

*APPLICABLE ONLY TO STUDENTS OF AQUINAS COLLEGE AKURE, ONDO STATE*

**PERSONAL INFORMATION:**

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

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Number of Children in the Family \_\_\_\_\_

Town of Origin: \_\_\_\_\_ Local Government Area: \_\_\_\_\_

Name of Parents/Guardian: \_\_\_\_\_ Occupation of Parents/Guardian: \_\_\_\_\_

Contact Address: \_\_\_\_\_ Phone Number of the Applicant (if any) \_\_\_\_\_

Phone Number of the Parents/Guardian: \_\_\_\_\_ Email Address: \_\_\_\_\_

**ACADEMIC INFORMATION:**

Current Level of Study: \_\_\_\_\_ (e.g. JS2, SS2)

Best Three Subjects: \_\_\_\_\_

Principal: \_\_\_\_\_ Class Teacher: \_\_\_\_\_

Why should the scholarship be awarded to you?

---

---

---

---

**SCHOLARSHIP REQUIREMENTS:**

- Letter of recommendation from the principal, dated and signed.
- Letter of recommendation from the class teacher, dated and signed.
- Recent passport photo.

**CERTIFICATION:**

I certify that the information provided is accurate and true. I understand that any false information may lead to disqualification from the scholarship award.

Principal's Signature & Stamp: \_\_\_\_\_ Date: \_\_\_\_\_

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

***LATE CHIEF JOSEPH OLANIPEKUN POPOOLA &  
LATE CHIEF MRS VERONICA MODUPE POPOOLA  
MEMORIAL SCHOLARSHIP AWARD  
APPLICATION FORM***

*APPLICABLE ONLY TO STUDENTS OF AQUINAS COLLEGE AKURE, ONDO STATE*

***SUBMISSION:***

Please submit your completed application form and supporting documents by uploading them to the Popoola Foundation website (<https://popoolafoundation.com>) using the 'Upload Application & Docs' option under the menu bar.