

Shri Prakash Gossai Academic Scholarship Program

APPLICATION

First Name: _____ Last Name: _____

Address: _____

Date of Birth: (dd/mm/yy) ____/____/____ Age: ____ Gender: ____ M ____ F

Cell phone: _____ Email: _____

Mother's Name: _____ Employed: ____ Yes ____ No

Father's Name: _____ Employed: ____ Yes ____ No

Annual Household income: \$ _____ # of members in household _____

Are you currently registered at University of Guyana? ____ Yes ____ No Area of study: _____

Are you a first-year student? ____ Yes ____ No If No, how many years completed? _____

Name of High School: _____ GPA and/or class rank _____

Please list and describe your volunteer experience in any church, temple, mandir, youth or community organizations:

Signature: _____ Date: _____

Please attach:

Academic transcript (university, high school, cxc)

Proof of enrollment at UG (from registrar)

2 recommendations (academic and spiritual or community leader)

Personal Essay (include academic, personal, career goals, interests after university studies, financial need, why you should be awarded scholarship, etc.)

Please submit application and all supporting documents by November 18, 2019

Email: spgasprogram@gmail.com