

TERTIARY EDUCATION SCHOLARSHIP TRUST (TEST) FOR GHANA

SCHOLARSHIP RENEWAL FORM 2023/24

AFFIX ONE
ENDORSED
PASSPORT SIZE
PHOTOGRAPH
WITH YOUR FULL
NAME BEHIND IT.

THIS APPLICATION FORM IS FREE AND NO APPLICATION FEES APPLY

**NOTE: THIS FORM IS ONLY FOR EXISTING TEST FOR GHANA AWARD HOLDERS AND NOT FOR
NEW APPLICANTS. DEADLINE FOR SUBMISSION OF RENEWAL FORM IS THURSDAY 31ST
AUGUST 2023**

NO RENEWALS WILL BE ACCEPTED AFTER THIS DATE

*Complete all questions using BLOCK letters only.
(Please note that your application will not be processed if you leave any question(s) unanswered)*

SECTION A – APPLICANT’S BACKGROUND INFORMATION

1. Full name, as it appears on your documents. (Surname) (Other Name(s))																	
3. Gender (Female/Male)	4. Student ID #: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																
8. Name of School (<i>name of University or Polytechnic</i>): School' Email Address: School' Telephone #: Personal Email Address: Telephone #: - Personal Mobile #: - WhatsApp #. (if applicable): -	9. Permanent Home Address: (where you normally reside with your parents/guardian. Do not provide a post office box number alone but rather a full address). District: Region:																
10. Address to which correspondence regarding this application should be sent:	12. Level of Study for 2023/24 academic year (e.g. if you are in level 100 currently then in 2023/24, you will be in Level <u>200</u>)																
	14. CGPA _____																

SECTION B – INFORMATION ON FINANCES

18. Estimated Expenses for the **2023/24 academic year**. (Estimate how much you will need to spend during the next academic year. These expenses should be relevant to your studies only.)

Academic Fees (University Approved Fees and Charges)	GH¢
Residential /Housing/ Hostel	GH¢
Feeding	GH¢
Books	GH¢
Transportation	GH¢
Other (specify)	GH¢
Other (specify)	GH¢
TOTAL	GH¢

19. Indicate below the amount of money **that you expect will be available to you** from each of the following sources for **2023/24 academic years**.

Personal	GH¢
Parents/ Guardian	GH¢
Benefactor	GH¢
Part-time employment	GH¢
SSNIT / SLTF student loan	GH¢
Scholarship (specify: e.g. MPs Common Fund, District Assembly etc)	GH¢
Other (specify)	GH¢
TOTAL	GH¢

20. How much funding do you require? This amount is the difference between your **total estimated expenses** (*question 18*) and what **you expect will be available** to you from the sources indicated (*question 19*).

(The total of QUESTION 18 minus the total of QUESTION 19) GH¢ _____

SECTION C – INFORMATION ON SPONSORSHIP

22. If you **have applied or intend to apply** for other types of financial support for the **2023/24 academic year**, please state:

The type of financial support (e.g. Scholarship, bursary, student loan)	Amount (GH¢)	The agency to which application has been, or, will be made (e.g. Ghana Government, SSNIT, SLTF, MTN)
a.		
b.		
c.		

23. If you **have been promised** financial support for the **2023/24** academic year from any Body/Organization, Benefactor, or Individual please provide:

Name and address of the Body/Organization/Benefactor/Individual	The amount in financial support (GH¢)
a.	
b.	

24. Provide the name and address of the organization, which has up to date been responsible for your education (If applicable).	25. Will the said sponsor <i>continue</i> to provide financial support for your education? (YES or No)
	26. If YES what is the expected total amount of sponsorship per year? GH¢ _____

Please **submit** any of the following that are applicable to you
(do not send the originals of any documents unless they are addressed to TEST):

- Evidence of income of parent/guardian.
- Most up to date academic transcript (**WITHOUT THIS YOUR RENEWAL WILL NOT BE PROCESSED**)
- Applicant's most current payslip (if applicable).
- Any other supporting documents that you believe will assist in the processing of your application.

Declaration

It is important that your eligibility for student financial support be based upon accurate information.

I
do hereby declare that all the information given above is true.

Signature of Student _____

Date _____

Note: Misrepresentation in any material form renders the application null and void. Any award made based on misrepresentation shall be withdrawn or refunded by the applicant, and he/she may be prosecuted. The truth, rather than lies, will get you Financial Support.

DECLARATION TO BE SIGNED BY BOTH PARENTS OR GUARDIANS

It is important that your dependant's eligibility for student financial aid be based upon accurate information.

I/We.....
do hereby declare that all the information given above is true.

Signature or thump print of **parent/guardian** _____

Date _____

Signature or thump print of second **parent/guardian** _____

Date _____

NOTE:

Misrepresentation in any form or manner shall render the application null and void.
Any awards made based on a misrepresentation shall be withdrawn or refunded by the applicant, and he/she also may be prosecuted.

TEST for Ghana reserves the right to cancel the applicant's application if false or incorrect information is supplied.

Thank you for your cooperation. Together, we can ensure that the right students get financial support, and that the integrity of the TEST scholarship scheme is preserved.