



**GUINEA**

**SCHOLARSHIP APPLICATION FORM**

(For CSI Academic and Vocational Scholarships - Information is considered confidential)

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

Card #: \_\_\_\_\_ Nationality: \_\_\_\_\_

Camp: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Dependents: \_\_\_\_\_

Date of Arrival in Guinea: \_\_\_\_\_

Name of Present Guardian/Contact Person: \_\_\_\_\_

Guardian's Location: \_\_\_\_\_

Training Solicited: \_\_\_\_\_

Why are you interested in this particular training? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How will the training benefit you? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of training institution: \_\_\_\_\_

What is your educational background?

<b>EDUCATION</b>	<b>PERIOD</b> (When to when)	<b>ACHIEVEMENT</b> (Last class)	<b>COUNTRY</b>
Primary School			
Secondary School.			
Others			
1			
2			
3			

Do you have children to look after? \_\_\_\_\_

How will your children be cared for if you are given scholarship to study?

What will you need to be able to attend your classes? (Materials, supplies, childcare etc)

How will you use the stipend to meet these needs?

Will you accept a periodic assessment of your work by ARC/CSI? \_\_\_\_\_

How would you like CSI to do this? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When do you plan to repatriate? Will you be able to finish your course before you go? \_\_\_\_\_

**Approved by:**

Grants Officer

Program Coordinator