



MUTA Education Scholarship Program

2022 – 2023 Academic Year

Personal Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date of Birth: _____ State of Origin: _____

Local Government Area: _____

Have you ever received MUTA award? YES NO

Are you a member of any cult organization? YES NO

Have you ever been convicted of a crime? YES NO

Educational Information

Name of University or School: _____

Department: _____ Area of Study: _____

Year of Entry: _____ Expected Graduation Date: _____

Current Level: _____ CGPA: _____

Word of Honor and Signature

I certify that my answers are true, accurate and complete to the best of my knowledge. If this application leads to award of MUTA scholarship, I understand that false or misleading information in my application or interview may result in automatic loss of the scholarship. I do not belong to any secret society and agree to abide by the laws and regulations of my home institution.

Signature: _____ Date: _____



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Student Information Verification

(To be completed by an official of competent authority)

The Head of Department
or appropriate authority (e.g., Registrar's office, Departmental Exams Officer)

Mr./Ms./Mrs _____ is applying for the 2022/2023 MUTA Educational Scholarship Program. We seek your help in verifying and authenticating the student's information provided above. We thank you in advance for your collaboration.

Name of Official: _____

Position and Rank: _____

Is the student a *bona fide* member of the department indicated? _____

What is the student's CGPA? _____

Please indicate the period in years or number of hours over which the GPA is calculated: _____

Signature: _____ Date: _____