



MRS OIL NIGERIA PLC SCHOLARSHIP FORM (STAFF)

Please note that this form should be completed by
the child of the staff of MRS Oil Nigeria Plc

Please affix one
passport
photograph (with
white background)

Ensure to write your
name and sign
behind the passport
photo

STUDENT INFORMATION

NAME (surname first): _____ TITLE (Mr. /Ms. /Mrs.): _____

DATE OF BIRTH: _____ NATIONALITY: _____

STATE OF ORIGIN: _____ LOCAL GOVERNMENT OF ORIGIN: _____

RESIDENTIAL ADDRESS: _____

LOCAL GOVERNMENT / STATE (of residential address): _____

MOBILE NUMBER: _____ EMAIL: _____

ACADEMICS

For Secondary School Applicants Only

SCHOOL NAME: _____ CLASS: _____

SCHOOL ADDRESS: _____

NAME / CONTACT NUMBER OF PRINCIPAL: _____

SUBJECTS AND GRADES: _____

For Tertiary Applicants Only

SCHOOL NAME: _____

SCHOOL ADDRESS: _____

COURSE OF STUDY: _____

NAME / CONTACT NUMBER OF HEAD OF DEPARTMENT: _____

SUBJECTS & GRADES (For first year students): _____

CGPA (Not applicable for first year students): _____

GENERAL

MRS STAFF'S NAME: _____

STAFF ID NUMBER: _____ STAFF MOBILE NUMBER: _____

ENDORSEMENT

Applicant's Signature and Date

Principal / Head of Department Signature, Stamp and Date