



Assured Care Int'l School Scholarship Program Application Form

Application Deadline: March 10, 2026

Date of Scholarship Examination: March 24, 2026

Venue: Assured Care International School Awka

Applicant Information

Full Name: _____

Date of Birth: _____

Age: _____

Gender: Male / Female

Address: _____

Phone Number (if available): _____

Email Address (if available): _____

Academic Information

Current School: _____

Class/Grade: _____

Mathematics Teacher's Name: _____

Contact Number of Teacher (if available): _____

Parents'/Guardians' Information

Parents'/Guardians' Name: _____

Relationship to Applicant: _____

Parents'/Guardians' Phone Number: _____

Parents'/Guardians' Email Address: _____

