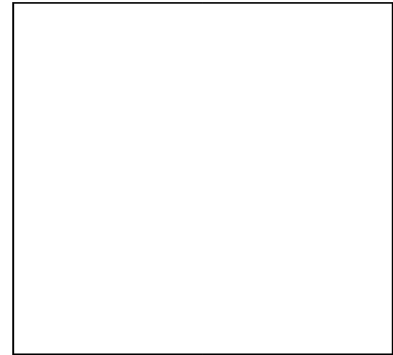


# ALL AFRICA CONFERENCE OF CHURCHES

## MASTER OF THEOLOGY IN ECUMENICAL LEADERSHIP SCHOLARSHIP APPLICATION FORM



Applicants Photograph

### SECTION A. PERSONAL DETAILS

i. Surname:		ii. Other names:	
iii. Date of Birth:	iv. Age:	v. Place of Birth	
vi. Country of Citizenship:		vii. Gender:	
viii. Nationality:		ix. ID Number/ Passport number:	
x. Address for Correspondence (address, code & town):			
xi. Residential Address (if different from above):			
xii. Mobile No:		xiii. Your email:	
xiv. Name of next of kin		xv. Relationship to next of kin:	
xvi. Tel no of the next of kin:		xvii. Email Address of the next of kin:	

### SECTION B. JUSTIFICATION FOR A SCHOLARSHIP

A. What kind of scholarship applied for (*Tick Appropriately*):

Partial ( )

Full ( )

Give reasons that demonstrate you genuinely require financial assistance from AACC. (*please attach more information or your story in a separate sheet*)

B.

I. ....

II. ....

III. ....

C. Indicate your current occupation and position in church or organization

.....

D. Indicate your contribution (*in USD*) to the programme other than air-ticket

.....

*(Kindly note that your own contribution or of your church/organization to the programme will inform decisions on the award of the scholarship).*

**Declaration:**

I .....declare that, information given is true and pledge made will be fulfilled before the admission to the programme.

**Applicants Signature:** .....

**Date:** .....