

AFRICA INTERNATIONAL UNIVERSITY

APPLICATION FOR WORK SCHOLARSHIP (This form is to be attached to Application for Scholarship)

APPLICANT INFORMATION

1. Details of Applicant

NameStudent Number.....

School (tick one)NEGST.....SPS.....ISAR.....Other

Degree enrolled in Year.....

2. Personal attributes (attach detailed CV)

Please give brief description of your attributes

Education

Year(s)	School(s)/College (s)	Certificate/Diploma/Degree Earned

Professional training

Year(s)	School/College	Certificate/Diploma/Degree Earned

Job experience

Year(s)	Employer	Function/Title

3. Work Scholarship Opportunities and Departments

Department	Opportunity	Tick
IT	Computer Lab Assistant	
	Website Assistant	

	Technician	
Academic	*Teaching Assistant <i>(Indicate School, Department and Level)</i>	
	**Research Fellow <i>(Indicate area of research)</i>	
Academic Services	Office assistant/Secretarial	
	Classroom attendant	
	Recruitment	
Administration	Office assistant/Secretarial	
	Security/Reception	
	Photocopying and printing	
	Custodian	
	Gardening	
	Maintenance	
	Cafeteria & Guest House Services	
	Tenant support services	
Clinic	Health Services Assistant	
	Wellness Assistant	
Community Life	Hostel Warden	
	Student Affairs (international and local students)	
	Student Lounge Attendant	
	Counselling	
	Sports Coaching	
	Financial aid assistant	
Communications	Public relations	
	Writing	
	Events support	
	Media production	
	Photography	
Finance	Accounts assistant	
Library	Library assistant	

Briefly describe personal attributes that make you suited for the opportunity

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4. Statement of financial need

Statement of financial need should be given comprehensively in the Application for Financial Aid which should accompany this application

5. Statement of Confirmation and Commitment

I confirm that:

- The information given in this application is accurate and true
- I have read the Work Scholarship Policy.
- I shall accept the decision made by AIU in respect of my application
- I shall, if my application is accepted, observe the Work Scholarship Policy

Applicant's signature.....Date.....

SCHOLARSHIP COMMITTEE ASSESSMENT

We have assessed the applicant's academic performance, personal attributes and need.

Decision of Scholarship Committee

Approved.....Not approved.....Differed.....

Remarks.....
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Date of meeting.....

Signed by Secretary of Scholarship Committee.....Date.....