



Educational Assistance Application Form

Application Number: E-#APP-E10

Applicants Information

Child Applicant: Hamid Redwan
Second Name *First Name*

Child's Sex: M F Child's Age: 13

Home Location: Kersa Ilala
Village Name

Father's Full Name: Mohammed Hamid
Second Name *First Name*

Are other children living at home? YES NO
If "Yes" please list age of each child living at home: 8,6,4,2



Other Information about the Family:

Child's Education

Last Grade Completed: 7 School: Adventist Elementary

What is your educational goal? Doctor

What is your favorite Subject in School? General Science

What do you like to do the most when you are not at school? Drawing deferent kinds of drawings

How will you use your education to benefit your village? I will treat the patients

Revised 06/18/09