



THRIVUS INSTITUTE FOR BIOMEDICAL SCIENCE AND TECHNOLOGY

APPLICATION FOR SCHOLARSHIPS AND GRANTS

APPLICANT'S PERSONAL INFORMATION (as it appears on official documents)

LAST NAME: _____ FIRST NAME: _____

MIDDLE NAME: _____

MALE FEMALE DATE OF BIRTH: ____/____/____

NATIONALITY _____ ADDRESS: _____

E-MAIL ADDRESS: _____ PHONE NUMBER: _____

PROFESSION: _____ EMPLOYER: _____

ARE YOU A PREVIOUS APPLICANT BENEFICIARY NEW APPLICANT?

I would like to be considered for the following scholarship/grant (ONLY one option)

THRIVUS RESEARCH GRANT: Offers partial funding to help masters and PhD students research both Gene Therapy and Human Embryology. Recipients will be selected based on their project proposal and academic performance.

CITY OF HOPE EMBRYOLOGY (COHE) GRANT: COHE grant is awarded to students who are studying and conducting research in Human Embryology. Research areas or projects are determined by the donors and students must show the interest and determination to venture into these areas.

AKOBEN-THRIVUS SCHOLARSHIP: Open to graduate students studying and researching in Gene Therapy and Human Embryology who exhibit academic and research excellence in these two areas. Research areas or projects are determined by the donors and students must show the interest and determination to venture into these areas.

BARROGA FAMILY SCHOLARSHIP FOR WOMEN IN SCIENCE: This scholarship offers to fund women studying Gene Therapy at Thrivus Institute. The goal of this scholarship is to encourage women to enter Gene Therapy in Africa as researchers, practitioners, and innovators.

PROGRAM OF STUDY _____ (Applicants must have received an offer of admission from Thrivus Institute.)

DECLARATION

I, _____ on this ____ day of _____, _____, hereby declare that the statements given by me in this form are complete and accurate. I understand all scholarship offers are conditional and may be withdrawn if information provided are inaccurate.

Signature of Applicant