AMERICAN UNIVERSITY OF NIGERIA
LAMIDO ZUBAIRU WAY, YOLA BY-PASS. P.M.B 2250,YOLA, ADAMAWA STATE, NIGERIA
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SCHOOL OF GRADUATE STUDIES
AUN ALUMNI GRADUATE SCHOLARSHIP FORM

SGS 003

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle Name_____

Previous Last Name (if applicable) _____

Address _____

Mobile Number _____

Gender: Male ☐ Female ☐

Email Address _____

Proposed/ current program of study

- PGDM ☐
- MBA ☐
- MSc Business Administration ☐
- MSc: Computer Science ☐
- MSc: Information Systems ☐
- MICS: Master of Information and Communication Science ☐
- MTWT: Master of Telecommunications and Wireless Tech ☐
- PhD: Computer Science ☐
- PhD: Information Systems ☐
- PhD Business Administration ☐

PREVIOUS AUN ACADEMIC HISTORY

AUN Student ID number _____Degree Awarded_____

Degree CGPA_____

Year of Graduation _____

Program of Study _____

Kindly attach your CV and return the form to the Graduate School. Electronic submissions should be sent to *graduate.school@aun.edu.ng*

Signature _____ Date _____

For office use only

Dean of Graduate School *Approved* _____

Bursary unit *Approved* _____