

**GERMAN AFRICA ASSISTANCE SCHONDORF**

CHAIRPERSONS PROF. LUDWIG GERNHARDT AND MRS. ADELHEID GERNHARDT,

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Mr. Wilbard Mwinuka, Luana ( Ludewa District ) and Njombe , Phone: 0757 077 844

**SPONSORED GODPARENTHOOD PROGRAMME**

**Education at Form V and Form VI (Advance Level) after secondary school Carrier for a student originating from Ludewa District.**

**APPLICATION FORM**

**Please fill and send one copy to the address above printed!**

Budget Year: ..... For A-level education at:

Name and Place of the School:.....

Address/P. O. Box ..... Headmaster's Name: .....

Bank account of the School: Name of the Bank/Account number/Acc Name/ Branch Address: .....

Responsible Bursar or other Person in Charge for the Account: .....

Necessary Expenses for my Education during this Academic Year in Total: TZS.....

**Personal Particulars ( Please write in Capitals ! )**

Applicant's Prenom e : ..... Family name:.....

Date of Birth : Date ..... Month.....Year..... male / female ? .....

Home Domicile :Place .....Ward ..... District: .....

Parents: Father's Name..... alive/or died in the year .....

Profession.....

Mother's Name:..... alive/or died in the year.....

Profession / Occupation if any .....

How many Brothers and Sisters do you have beside of you in the family? .....

Orphans Guardian if any : Name .....Profession .....

My intention to become as profession in the future:.....

My personal interests beside of the studies:.....

Previous formal Education places:

**Primary School:** ..... at the years .....up to standard 7

**Secondary School:** .....at the years .....up to Form IV

**Attached are copies of my latest annual report or/and my O-Level certificate and a budget or joining instruction ( in English Version ) signed by the Headmaster.**

Place/Date:..... Signature of the applicant .....

Recommendations by PADECO:

We recommend this applicant for support because .....

Name / Institution .....Signature.....