



SO TRAVEL GH

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## FAMILY INFORMATION

### SPOUSE

Surname  Middle Name

First Name  Date of birth

Sex  Citizenship  Country of birth

Country of residence  Marital status

Date of marriage  Number of dependents

ADDRESS

Phone number  Postal code

Email

### FATHER / GUARDIAN

Surname  Middle name

First name  Date of birth

Citizenship  Country of birth

Country of residence  Marital status

Date of marriage  Number of dependents

Address

Phone number  Postal code

Email

**MOTHER / GUARDIAN**

Surname	<input type="text"/>	Middle name	<input type="text"/>
First name	<input type="text"/>	Date of birth	<input type="text"/>
Citizenship	<input type="text"/>	Country of birth	<input type="text"/>
Country of residence	<input type="text"/>	Marital status	<input type="text"/>
Date of marriage	<input type="text"/>	Number of dependents	<input type="text"/>
Address	<input type="text"/>		
Phone number	<input type="text"/>	Postal code	<input type="text"/>
Email	<input type="text"/>		

This information provided on the application form is used to determine whether you may be offered admission to an institution abroad. If you are enrolled as a student to an institution the information provided will be used to administer enrollment to offer other services to you.

SO Travel Ghana Limited shall not be liable for providing any false information.

By submitting this application, I declare to the best of my knowledge the information supplied by me is true, correct and complete in every respect.

I acknowledge that the submission of false, incorrect, incomplete or misleading information may result in delays in processing, my application being rejected and cancellation of my enrollment. I authorise SO Travel Ghana Limited to verify any records related to this application and grant my consent for other educational institutions, admissions centres, government bodies or employers to disclose my information in this regard.

I am aware of the likely costs of my stay abroad, which includes tuition fee and associated study costs and dependent expenses (if applicable) and I understand that neither SO Travel Ghana Limited nor the foreign Government is obliged to help me if I require financial assistance. I declare that I have access to sufficient funds to cover the full costs of my study abroad for the duration of my studies.

Applicant signature \_\_\_\_\_

Date \_\_\_\_\_