THIS FORM IS ONLY FOR GOVERNMENT EMPLOYEES

This application may be deemed ineligible if all sections are not completed. Insert "NA" in sections that are non-applicable.

Form 5 • Tonga Government Scholarships • 2027-Intake • CEO Acknowledgement	
Applicant's Given Name/s	**Applicant's Surname**
Name of Ministry	**Applicant's Title**
Dates of Employment	**Location of Employment**
Does the Ministry support this application?	**Would you rehire this person?**
☐ Yes ☐ No	☐ Yes ☐ No

How would your Ministry benefit from the applicant's proposed study?

Please write any other comments that would assist us in understanding this applicant's motivation and abilities:

Signing this form is an acknowledgement that the organization is supportive of the application and plans for the release of the applicant. The organization agrees to release the applicant should the applicant be successful.

CEO's Signature	CEO's Name (please print)	Date

(Please stamp this form with your Ministry's official stamp, firmly seal it in an envelope stamp the seal of the envelope several times and return it to the applicant.)