



# REPUBLIC OF KENYA

COUNTY GOVERNMENT OF NYANDARUA



DEPARTMENT OF EDUCATION, CULTURE AND THE ARTS

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## BURSARY APPLICATION FORM

The Fund Administrator,  
Thru' the Ward Administrator ..... Ward,  
Nyandarua County Bursary Fund

### PART A (STUDENTS PARTICULARS)

1. Full Name \_\_\_\_\_  

Last
First
Middle
2. Sex Male ( ) Female ( )
3. Sub County ..... Ward ..... Village.....
4. Date of Birth ..... Students Contact: .....
5. Name of School \_\_\_\_\_  
NEMIS NO. \_\_\_\_\_ Admission No \_\_\_\_\_ Class/Form \_\_\_\_\_
6. Name of university or college \_\_\_\_\_  
Adm No \_\_\_\_\_ Year of study \_\_\_\_\_

\*(For students joining Form one attach school admission form, final examination result slip, and a leaving –certificate)

Name of the school Admitted \_\_\_\_\_

Category of the school (tick the applicable category)

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• National</li> <li>• Extra- County</li> <li>• County</li> </ul> | <ul style="list-style-type: none"> <li>• Sub County</li> <li>• Day school</li> </ul> |
|---|--|

### PART B AMOUNT APPLIED

- Total Payable Fees in words and figures-

In words \_\_\_\_\_

Figures (Kshs) \_\_\_\_\_

- Outstanding Balance

In words \_\_\_\_\_

Figures (Kshs) \_\_\_\_\_

- Amount paid or able to raise

In Words \_\_\_\_\_

Figures (Kshs) \_\_\_\_\_

- **School Details (Mandatory)**

Account Name \_\_\_\_\_

Account No: \_\_\_\_\_

Bank : \_\_\_\_\_

Branch: \_\_\_\_\_

Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PART C: FAMILY INFORMATION**

**1 Tick appropriately**

**Family Status**

Both parents are alive       Single parent       One parent is deceased

Orphan       Both or one Parent/ Guardian has a disability

The student has a disability or a special education need

(Attach supporting documents e.g. death certificate, letter explaining disability or other disadvantage/circumstances from chief, religious leader, prominent reference)

1. Parents/Guardian's Name(s)

**Father** \_\_\_\_\_

Occupation/Profession \_\_\_\_\_

Contact \_\_\_\_\_

Age \_\_\_\_\_

**Mother** \_\_\_\_\_

Age \_\_\_\_\_

Occupation/Profession \_\_\_\_\_

Contact \_\_\_\_\_

**Guardian**

Occupation/Profession \_\_\_\_\_

Contact \_\_\_\_\_

Age \_\_\_\_\_

2. How many siblings do you have? \_\_\_\_\_

3. How many children does the guardian have? \_\_\_\_\_

4. How many of your siblings are working/ in business/ farming? \_\_\_\_\_

5. Give details of your siblings/ guardian's children in secondary or post-secondary institutions in the table below;

Siblings' Name/ Guardians Children	Name of Institution	Year of Study	Total Fees	Fees Paid	Outstanding Balance
<b>GRAND TOTAL</b>					

6. If an orphan, who has been paying for your education? (State)

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Contact: \_\_\_\_\_

#### **PART D: INFORMATION ABOUT FAMILY FINANCIAL STATUS**

##### **GROSS INCOME IN THE LAST 12 MONTHS – (KSHS)**

	Father	Mother	Guardian/Sponsor
Main occupation			
Other occupation capable of raising income			
Gross income			

- Gross income: (This means income from salary, business ,farming or any other lawful source per year.)

## **PART E: OTHER DISCLOSURES**

### **DISCLOSURE OF ANY OTHER BURSARY BENEFIT**

- i. **Have you received any other bursary or support from a public source? (Tick the relevant box)**

YES  NO

**If yes, disclose the source and the amount granted**

Source \_\_\_\_\_

Years received \_\_\_\_\_

Amount granted \_\_\_\_\_

- ii. **If you are a student in university or tertiary college, have you applied for financial support from HELB? YES  NO**

- iii. **If YES, state the outcome and why you should be granted a bursary under this programme:** \_\_\_\_\_

- iv. **If No, state the reason** \_\_\_\_\_  
\_\_\_\_\_

### **1. STUDENT'S DECLARATION**

I declare that to the best of my knowledge the information given herein is true

**Student's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **2. PARENTS/GUARDIAN'S DECLARATION**

I declare that I have read this form/this form has been read to me and I hereby confirm that the information given herein is true to the best of my knowledge.

**Parent's/Guardian's Name:** \_\_\_\_\_

**Parent's/guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **3. SCHOOL VERIFICATION**

- a) **For Continuing Students (applicable to public secondary and boarding primary schools)**

Year

Position in class/form Term I  Term II  Term III

**Student's Discipline (tick one option only)**

Excellent  V. Good  Fair  Poor

**Principal/Head teacher's brief comments on the student's level of need, discipline and academic performance.** \_\_\_\_\_  
\_\_\_\_\_

**Note:** Applicant to Attach Latest Report Form.

I confirm that the above is a continuing student in this school.

Principal/Head teacher's Name \_\_\_\_\_ Signature \_\_\_\_\_

TSC No. \_\_\_\_\_

Date and School Stamp \_\_\_\_\_

**AREA CHIEF/ASSISTANT CHIEF**

**Comment on the status of the family/parent**

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I certify that the information given above is correct.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Position/Designation: \_\_\_\_\_

Date/ Stamp: \_\_\_\_\_

**NOTES**

- i. All relevant sections in this form **MUST** be filled and ensure that the information given is correct.
- ii. Wrong information will automatically disqualify the applicant.
- iii. One should apply one form at a time and in one Ward **ONLY**.
- iv. Supporting documents to be attached (compulsory).
  - a) **Fees structures.**
  - b) **Admission letter.**
  - c) **Performance report/ Recent report form/ Transcript**
  - d) **School/ College/ University ID card.**
  - e) **Any other relevant documents.**

**PART E: FOR OFFICIAL USE ONLY BY THE WARD BURSARY ALLOCATION COMMITTEE.**

TOTAL SCORE:

Approval (tick):      Approved for Bursary       Not approved for Bursary

**Reasons for award or disapproval**

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**Nature and terms of full or partial sponsorship**

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**CHAIRMAN**

**SECRETARY**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

ID NO: \_\_\_\_\_

PF/ ID NO: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_