

# NATIONAL GOVERNMENT CONSTITUENCIES DEVELOPMENT FUND

## SEME CONSTITUENCY



### Bursary Application Form

Serial No.

#### CATEGORY OF APPLICATION (*Tick as Applicable*)

Secondary School  College  Others .....

#### INSTRUCTIONS TO APPLICANT

*Please, read all the instructions carefully and fill in the form accurately).*

1. This form is for **SECONDARY SCHOOLS, MIDDLE -LEVEL COLLEGES and UNIVERSITIES.**
2. Submit a duly filled application form to SEME NGCDF offices in Kombewa
3. All sections of the form must be filled.
4. **COMPULSORY ATTACHMENTS:**
  - i) Copy of Student Identity Card/birth certificate and copy of National Identity Card of Parents
  - ii) Copy of Relevant Academic Certificates, Report Form or College Transcript.
  - iii) Admission Letter, Fee Structure and Fee Balance Statement duly signed and stamped by the institution's authority. (**COMPULSORY FOR ALL APPLICANTS**)
  - iv) Attach death certificates of parents and your own birth certificate to proof kinship where applicable.
5. This application is **NOT A GUARANTEE** for a bursary award.
6. Bursary once allocated is **NOT TRANSFERABLE**. Cheque will be written in favor of the institution and not to Individual applicants.

**FOR OFFICIAL USE ONLY:** Received by:..... Serial No.....  
Signature..... Date .....

#### **PART A: PERSONAL DETAILS, INSTITUTIONAL & OTHER DETAILS**

1. Name of the Student: .....
2. Reg. / Adm No.....
3. ID NO. (Where applicable) .....
4. Permanent Home Address.....Tel No.....
5. Gender: A. Male  B. Female  Date of Birth (DD/MM/YY: .....
6. Place of birth (or Residence) Sub County:..... Ward:.....  
Location:..... Sub Location ..... Village:.....
7. Name of School/College/University .....
- Campus/ Branch.....
- Faculty/Department ..... Course of Study.....
- Mode of Study: Regular  Parallel  Boarding  Day
- Class/ Year of Study .....Expected Year and Month of Completion.....

**PART B: FAMILY BACKGROUND**

1. Kindly indicate your family status: Total Orphan  Partial Orphan  Both Parents Alive   
 Single Parent  Others (state).....
2. Please fill in the following details for your parents/ guardians (if still alive).

Details	Father/Guardian	Mother/ Guardian
Name		
Occupation /Profession		
Main Source of Income		
Other source of income farming, business etc.		
Employed?(Yes/No/Retired)		
Telephone Contact		

3. Indicate the names of Siblings in Schools/ Colleges/ Universities this year

Names	Relationship	School / Institution	Class	Total Fees	Outstanding Balance
<b>GRAND TOTAL</b>					

**PART C: APPLICANT'S ADDITIONAL INFORMATION**

1. Why are you applying for a bursary?.....  
 .....  
 .....
2. Do you suffer from any physical impairment (Disability)? Yes ( ) No ( )
3. Do you have any other disability or any chronic illness? Yes ( ) No ( )  
 If yes kindly describe and provide evidences: .....  
 .....  
 .....
4. Do any of your parents/ guardians have any form of disability? Yes ( ) No ( )  
 If yes, describe the disability .....  
 .....

5. Does any of your parents/ guardians suffer from any chronic disabling medical condition illness:

Yes ( ) No ( )

If yes, kindly describe the condition.....  
.....

**PART D: EDUCATION FUNDING HISTORY**

State the main source of education funding in the past (Fill where applicable)

School	Main Source of Funding
Secondary School	
College	
University	

**PART E: DECLARATIONS**

**1. Applicant's Declaration:** *I hereby declare that the information provided herein is true to the best of my knowledge and belief and understand that any false information provided shall lead to automatic disqualification by the committee.*

Applicant's full Name: .....

Adm. / Reg. No.:..... ID No.:.....

Date:.....Signature.....

**2. Parent / Guardian Declaration** *I hereby declare that the information provided herein is true to the best of my knowledge and belief and understand that any false information provided shall lead to automatic disqualification of the student.*

.....

Name (Parent/ Guardian)	Signature	Date
-------------------------	-----------	------

**PART F: RECOMMENDATION:**

**1. Religious Leader-** Comment on the Student /Family/ Parent Status.

.....  
.....

**Assessment of the applicant:** 1. Very needy 2. Needy 3. Not Needy

*I declare that I know the contents of this application form and hereby confirm that the information herein is true to the best of my knowledge*

.....

Name	Signature	Date & Official Stamp
------	-----------	-----------------------

2. **Area Chief / Assistant Chief-** Comment on the Student /Family/ Parent Status.

.....  
.....

**Assessment of the applicant:** 1. Very needy 2. Needy 3. Not Needy

*I declare that I know the contents of this application form and hereby confirm that the information herein is true to the best of my knowledge*

.....  
Name Signature Date & Official Stamp

**PART G: INSTITUTION VERIFICATION**

*Tick as Applicable*

**Student's Conduct:** Excellent ( ) Very Good ( ) Good ( ) Fair ( ) Poor ( )  
**Academic Performance:** Excellent ( ) Very Good ( ) Good ( ) Fair ( ) Poor ( )

*I confirm that the above-named student is in this institution*

.....  
Dean of Students/ Principal Signature Date & Official Stamp

**PART G: FOR OFFICIAL USE BY THE BURSARY COMMITTEE**

- 1. The form was dully filled and signed: Yes ( ) No ( )
- 2. All supportive documents have been attached: Yes ( ) No ( )
- 3. Following the Bursary Committee Meeting Held on ..... The applicants request for bursary is hereby RECOMMENDED  NOT RECOMMENDED

Comments:.....  
.....

**Bursary award: Kshs.** ..... **Score**

**Officials**

NAME	DESIGNATION	SIGNATURE
1.		
2.		
3.		