



**National Government Constituencies Development Fund
Subukia Constituency**

P.O Box 86.
Subukia

Email: subukia@cdf.go.ke

NG-CDF

BURSARY APPLICATION FORM FOR SECONDARY INSTITUTIONS (F/Y 2019/2020)

SERIAL NO:

WARD: _____ VILLAGE/ESTATE: _____

PART A: TO BE FILLED BY THE STUDENT (personal and institutional details)

| | | |
|---------|-------------------------|---------------------|
| Names | Surname: | Other names: |
| School: | School A.DM. NO: | |

PART B: FAMILY BACKGROUND. (Tick where applicable)

| NO | PARENTS NAMES | OCCUPATION | TEL. NO | STATUS(ALIVE/DEAD) |
|----|---------------|------------|---------|--------------------|
| | | | | |
| | | | | |

NAME OF THE SCHOOL.....Year.....

School Address.....

Tel.....

Day Scholar () Boarder ()

Mother's detail:

Name.....Id no.....

Occupation.....

Type of employment (tick where applicable) permanent () contract () casual ()

Gross income.....signs.....

Father's detail

Name.....Id no.....

Occupation.....

Type of employment (tick where applicable) permanent () contract () casual ()

Gross income.....signs.....

Indicate the names of siblings in school this year;

| NO | Name | Secondary | College/university | Fees payable |
|----|------|-----------|--------------------|--------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

PART C: STUDENT DECLARATION

I hereby declare that the information provided herein is true to the best of my knowledge and belief and that any false information provided shall lead to automatic disqualification by the committee.

Applicant’s Full Name.....signature.....Date.....

PART D: SCHOOL VERIFICATION.

NAME OF THE SCHOOL _____

I confirm that the applicant is known by the above names and is a registered student in this school and that the personal details and information on fee provided are true to the best of my knowledge.

Name of principal: _____ Signature: _____

School stamp: _____

Account Name of the school: _____

PART E: FINANCIAL INFORMATION.

Total Fee: _____ Paid/Able to raise: _____ Outstanding Balance: _____

Has the student ever benefited from bursary from Subukia Constituency? Yes/NO

If Yes how much.....

Has the student ever benefited from any other bursary e.g. county government bursary or bursary from ministry of education.....if yes state amount.....

Brief description about the student

Remarks.....

Bank Name..... Bank Branch.....

Account Number.....Address.....Postal code.....

Finance officer (Full Names).....signature.....date &official stamp.....

Contacts.....

PART F: CHIEFS DECLARATION.

BRIEF DESCRIPTION OF THE STUDENTS FAMILY STATUS

.....
.....

Location.....sub-location.....

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

Name: _____ Signature: _____ date& official stamp_____

NOTE: ATTACH ALL SUPPORTIVE DOCUMENTS.

- 1. Recent fee structure.
- 2. Performance information evidence.

PART G: BURSARY COMMITTEE (FOR OFFICAL USE ONLY.)

Was the form duly and signed? Yes () No ()

Have the entire supportive document been attached? Yes () No ()

If not approved give reasons for disqualification.....

If approved amount awarded KShs.....