



National Government Constituencies Development Fund
Suba North Constituency

P.O Box 311-40305

MBITA

Email: cdfsubanorth@ngcdf.go.ke

**I AM A WINNER BURSARY SCHOLARSHIP APPLICATION FORM
(FINANCIAL YEAR 2023/2024)**

SUBMISSION DATE _____

FORM SERIAL NUMBER _____

INSTRUCTIONS

(Please, read all the instructions carefully and fill in all sections of the form accurately in BLOCK letters)

This form is for interested students who sat for KCPE in 2023 and meets the eligibility criteria below;

1. Must have scored a minimum of 360 marks for girls and 370 marks for boys
2. Must be a resident of Suba North Constituency
3. Must have sat for Kenya Certificate of Primary Education (KCPE) Examinations in a school within Suba North Constituency
4. Must be needy and deserving
5. Must not be a beneficiary of any other Education scholarship scheme/ programme
6. Must submit a duly filled application form to Suba North NG-CDF office or any other designated area
7. The applicant must insert his/ her Index Number on all pages as indicated.

PART A: TO BE COMPLETED BY THE APPLICANT/PARENT/GUARDIAN

Section I: Student & Institution Details

1.	Full name of Student (as it appears in ID/ Official documents)	
2.	Gender	
3.	Date of Birth	
4.	Name of Contact Person	

NAME OF STUDENT..... INDEX NUMBER.....

5.	ID Number/Personal Number of Contact Person	
6.	Cell Phone Number of Contact Person	
7.	Name of Location	
8.	Name of Ward	
9.	Name of Sub Location	
10.	Name of Village/ Estate	
11.	Name of Primary School Attended	
12.	KCPE Index Number	
13.	Marks Attained in KCPE	
14.	Name of Primary School Head teacher	
15.	Contact of Primary school Head teacher	
16.	Name of Secondary School Admitted to	
17.	Secondary school Physical Address	
18.	Secondary school Postal Address	
19.	Secondary school Telephone Contact	
20.	Secondary School Official E-mail address	
21.	Student's Correct Admission/ Registration Number (Must be availed to NG-CDF office upon admission)	
22.	Student's NEMIS Number (Must be availed to NG-CDF office upon admission)	
23.	Secondary School MOE Code (Must be availed to NG-CDF office upon admission of the student)	
24.	Mode of Study	Boarding () Day ()
25.	Expected year of Completion	Year
26.	School fees Breakdown per term	Term 1 Kshs..... Term II Kshs..... Term III Kshs. Other Charges Kshs..... Total Kshs.
27.	Amount Applied for (Kshs)	
28.	School Bank Account number	
29.	Name of Bank	
30.	Bank Branch	

Section II: Family Background

Kindly indicate your family status

Total Orphan	
Partial Orphan	
Single Parent	
Both Parents Alive	
Other (State)	
Number of Siblings Alive	
Estimated Family Income (Annually)	
Estimated Family Expenses (Annually)	

Attach photocopies of death certificate(s) and verification letters from area chief/ assistant chief where applicable

a) Father

Name..... Address.....

Tel. Number..... Occupation.....

Type of Employment

Permanent () Contractual () Casual ()
 Retired () Self-Employed () None ()

Main source of income.....

b) Mother

Name..... Address.....

Tel. Number..... Occupation.....

Type of Employment

Permanent () Contractual () Casual ()
 Retired () Self-Employed () None ()

Main source of income.....

c) Guardian (where applicable)

Name..... Address.....

Tel. Number..... Occupation.....

Type of Employment

Permanent () Contractual () Casual ()
 Retired () Self-Employed () None ()

Main source of income.....

d) Indicate the names of siblings in school/college/university this year

NAME OF SIBLING	INSTITUTION OF LEARNING/ TRAINING	TOTAL FEES KSHS	FEES PAID KSHS	FEES BALANCE KSHS
TOTAL				

Section III: Applicants Additional Information

- a) Why are you applying for bursary?
- b) Do you suffer from any physical impairment (disability)? Yes () No ()
- c) Do you have any other disability or any chronic illness? Yes () No ()
If yes, kindly describe and provide evidence
- d) Does any of your parents/guardian have any form of disability or suffer from any chronic disabling medical condition? Yes () No ().
If yes, describe the disability or illness.....

PART B: DECLARATION

i) Student

I _____ hereby declare that the information given herein is true to the best of my knowledge and hereby accept that any false information will automatically disqualify my application.

Signature: _____ **ID No** _____ **Date:** _____

ii) Parent/Guardian of the Applicant

I declare that I have read this form/ this form has been read to me, and hereby confirm that the information given herein is true to the best of my knowledge and hereby accept that any false information will automatically disqualify this application.

Parent/ Guardian's Name: _____

Signature: _____ **I/D No** _____ **Date** _____

iii) Primary School Headteacher

I certify that the applicant was a student in this institution and sat for his/her Kenya Certificate of Primary Education Examinations in the Year _____ and attained _____ marks. I have checked all the information given herein and hereby confirm that they are complete and true to the best of my knowledge.

Comment on financial status of the student _____

NAME **Signature/ Official Stamp** **Date**

NAME OF STUDENT..... INDEX NUMBER.....

iv) Chief/Assistant Chief/ Religious Leader

I certify that the applicant is a resident of Suba North ConstituencyWard
LocationSub location and that I have checked all the information given herein and
hereby confirm that they are complete and true to the best of my knowledge.

Comment on family financial status _____

Name	Signature/ Official Stamp	Date
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PART 3: FOR OFFICIAL USE ONLY BY SUBA NORTH NG-CDF BURSARY SUB-COMMITTEE

Bursary Awarded: Yes No Amount awarded (Kshs)

If No, please give reasons: _____

Chairman

Secretary

Signature _____

Name _____

Date _____

COMPULSORY ATTACHMENTS:

- i) Copy of result slip duly certified by the primary school headteacher
- ii) Copy of student's birth certificate
- iii) Copy of parent/guardian national identity card.
- iv) Admission letter and fee structure duly signed and stamped by the institution's authority.
- v) Attach death certificates of parent(s)/ guardian where applicable

NOTE:

- ✓ Cheques will be written in favour of the learning institution named herein and not to individual applicant's or any other names
- ✓ Bursary once allocated is only transferable with written approval of the Fund Account Manager Suba North NG-CDF

END