



BURSARY APPLICATION FORM

A. PERSONAL INFORMATION

SERIAL NO: FY-2023/24.....

- Name of Applicant..... I.D NO.....
(As they appear in Student ID/National ID) (Where Applicable)
- Sex: Male Female Date of Birth...../...../.....
- Do you have any disabilities? YES Specify..... NO
- Are you currently employed? YES NO Nature Permanent Temporary
- Sub Location..... Location..... Ward.....
(Attach Copy of both National and Students Identity or Birth Certificate where applicable)

B. INSTITUTION INFORMATION

- Name of Institution..... Code.....
- Name of Campus (Where Applicable)
- Year of Study: Expected Year of Completion.....
(Specify)
- Registration/Admission No.....NEMIS No.....
- Level of Education: Secondary Tertiary Special Other
- Secondary School Applicants: State Whether You are: Day Scholar Border
(Attach previous term report form or calling letter and KCPE result slip for those joining Form 1)
- Tertiary Applicants State the Course: Certificate Diploma Degree Other
- Annual Fees Payable..... Outstanding Balance (If any)
- Do you have any Sponsorship/ Bursary From any other source YES Amount.....NO
- Did you receive a bursary last year? YES Amount..... NO
- Any past bursaries received from CDF? Amount..... Year.....
- Account Name.....
(This may differ with the name of the institution)
- P.O Box..... Code..... Town..... Telephone No.....
- Bank..... Branch..... Account No.....

THIS FORM IS NOT FOR SALE

C. BACKGROUND INFORMATION

- 1. Father’s Name..... Occupation.....
- 2. Mother’s Name..... Occupation.....
- 3. Have you lost any of your parents?

Father Reasons.....

Mother Reasons.....

- 4. What is the current status of your parents?

Single Parent Both Parents Alive One Parent is a PWD Both Parents are PWDs

(Attach relevant documents i.e. Copy of Parent(s)/Guardian’s ID, Death Certificate, Burial Permit and PWD certification(s))

D. DECLARATIONS

- 1. APPLICANT

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

Name..... Mobile No.....

Signature..... Date.....

- 2. PARENT/GUARDIAN

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.

Name..... ID No.....

Signature..... Date..... Mobile No.....

E. CERTIFICATION

- 1. CHIEF/ASSISTANT CHIEF

I certify that the applicant is a resident of my Sub-Location and that I have checked the information given herein and confirm it to be true to the best of my knowledge

Name..... Mobile No.....

Signature & Stamp Date.....

- 2. INSTITUTION

I certify that the applicant is admitted as a full/part-time student in this institution and that the information provided in part B above is true.

Name.....Signature & Stamp..... Date.....

(To be certified by the Dean of Students or Principal)



F. OFFICIAL USE ONLY

- 1. Applicant's Form is duly filled and signed YES NO
- 2. The applicant has submitted relevant supporting documents YES NO
- 3. The applicant has been awarded KShs.....

Authorized Signature (CDF)..... **Date**

FY-2023/2024