

NATIONAL GOVERNMENT CONSTITUENCIES DEVELOPMENT FUND

SEME CONSTITUENCY



Bursary Application Form 2024/2025

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.

Form to be submitted as from Jan 6, 2025 to
Jan 17, 2025

FOR OFFICIAL USE ONLY:

Received by:..... Serial No.....

Signature.....Date

PART A: PERSONAL DETAILS, INSTITUTIONAL & OTHER DETAILS

NAME OF STUDENT

Reg/ Adm No ID No (Where Applicable)

Student NEMIS No. Tel Number

Gender Male Female Date of Birth (DD/MM/YY)

Place of birth (or Residence) Constituency Ward

Location Sub Location Village

Name of School/ College / University

Institution CODE provided by Ministry of Education (Secondary School)

Campus/Branch Level of Study (Degree/Dip/Cert)

Course of Study

Mode of Study: Regular Parallel Boarding Day

Class/ Year of StudyExpected Year and Month of Completion.....

Form to be submitted as from Jan 6, 2025 to
Jan 17, 2025

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
GRAND TOTAL					

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

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

School	Main Source of Funding	Other Sources of Funding
Secondary School		
College		
University		

2. How much Bursary are you applying for?.....

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

- The form was dully filled and signed: Yes () No ()
- All supportive documents have been attached: Yes () No ()
- 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.		