



NG-CDF

**National Government Constituencies Development
Fund Board**
Ndhiwa Constituency
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**BURSARY APPLICATION FORM FOR STUDENTS IN SECONDARY SCHOOL
INSTITUTIONS**

(INSTRUCTIONS: Kindly provide your information in bold/capital legible letters.)

NB: Failure to fill in any PART or OMISSION of any required information will lead to AUTOMATIC DISQUALIFICATION

PART A: STUDENTS PERSONAL DETAILS

1. FULL NAMES.....
Last First Middle

2. Sex Male () Female ()

3. Date of Birth (...../...../.....) Adm no (.....) Class (.....)

4. Name of school.....
Year of study.....

DISTRICT..... DIVISION.....

LOCATION..... SUB-LOCATION.....

WARD..... VILLAGE/ESTATE.....

PART B: FAMILY DETAILS

(1) Father's Names.....

(2) ID No.....

(3) Mother's Names.....

(4) ID No.....

(5) Parents annual income.....

(6) Parents annual expenditure.....

(7) Special cases

None ()

Disabled ()

Total orphan ()

Partial orphan ()

- (8) Parents' financial ability
 Partially able to pay fees ()
 Unable to pay fees ()
 Too burdened ()
 Totally unable ()

(9) Physical address.....

(10) Tel/Mobile phone

Attach support documents e.g. death certificates, letter explaining disability or other disadvantage/circumstances from Chief, Religious Leader, Prominent reference

Siblings Information

How many brothers and sisters do you have? (.....)

- (11) How many Children does the guardian have? (.....)
 (12) How many are working/ in business/ farming? (.....)
 (13) How many are in Secondary School? (.....)
 (14) How many are Post-Secondary Institutions? (.....)
 (15) Total Siblings fee (.....)
 (16) If both parents are not alive, who has been paying for your education?

(For continuing students)

(17) Have you ever benefited from the Constituency Bursary Fund?
 Yes..... No.....

(18) If yes, state the amount Kshs.....

PART C: CHIEF/ASSISTANT CHIEF

Comment on the status of the
 Family/Parent.....

Certify that the information given above is correct

Name.....Signature.....Date.....

(Official stamp)

Designation.....

For those students joining Form 1 (Please attach Joining Instructions)

(a) School admitted National.....
 Provincial.....
 District.....

(b) Former School Head teacher (Primary)
Students/Pupils conduct: Excellent..... V. Good.....Good.....
Fair..... Poor.....

I declare to the best of my knowledge that the above information is true/ or the applicant to attach a copy of
Certified School Leaving certificate.

.....
Name Signature Date & School stamp

(c) Applicable to all students

Total Fees	Paid/able to raise	Outstanding balance
Kshs.....	Kshs.....	Kshs.....

RELIGIOUS LEADER

Comment on the Family/Parent status
.....
.....

I certify that the information given above is correct.
Name.....
Signature.....Date.....
Position.....

PART D: DECLARATION

1. STUDENT’S DECLARATION

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

Student’s Signature.....Date.....

2. PARENT’S/GUARDIAN’S DECLARATION

I declare that I have read this form/this form has been read to me and I hereby confirm that the information given is true to the best of my knowledge.

Parent’s/Guardian’s Name.....

Parent’s/Guardian’s Signature.....Date.....

3. SCHOOL VERIFICATION

(a) For continuing students

Year.....

Position in Class/Form Term 1..... Term II..... Term III.....

(Attach Report form)

Students Discipline (Tick one option only)

Excellent..... V. Good.....Good.....Fair.....Poor.....

Head teachers’ brief comment on the student’s level of need, discipline and academic performance

.....
.....
.....

I declare that the above named is a student in this school.

Head teacher’s Name.....signature.....

Date and Schools stamp.....

PART H: ATTACHMENTS

Kindly remember to attach copies of the following;

- 1. Current fees structure
- 2. Copy of current report form
- 3. Copy of Parent’s National ID card
- 4. Copy of Parent’s Voters card
- 5. Parent(s) death certificate or burial permit (Orphans)

PART E:
FOR OFFICIAL USE ONLY BY THE CONSTITUENCY BURSARY COMMITTEE

SCORE

APPROVED FOR BURSARY.....
NOT APPROVED FOR BURSARY.....
REASONS.....
.....

BURSARY AWARDED KSH

Chairman’s Name.....Signature.....Date.....

Secretary’s Name.....Signature.....Date.....

Official Stamp