



Serial No.

FY- 2019/2020

NATIONAL GOVERNMENT CONSTITUENCIES DEVELOPMENT FUND

OFF OYUGIS - KISUMU ROAD
OPPOSITE OYUGIS POLICE STATION

Visit our Website
Website: www.cdf.go.ke

P.O Box 264 - 40222 OYUGIS
E-mail: cdfkasipul@ngcdf.go.ke

SECONDARY SCHOOLS BURSARY APPLICATION FORM

INSTRUCTIONS TO APPLICANTS

1. This application form is issued **FREE OF CHARGE** by Kasipul NG-CDF Office
2. Applicant must attach I.D. and voter's card photocopies of parents /guardian.
3. Applicant must attach **COPY** of current report form.
4. Bursary awarded is not transferable by the beneficiary.
5. Approved bursary awards will be paid directly to the **Institution** and **cannot** be converted to cash payments to the applicant.
6. If single or both parents are dead, you must attach support document e.g. burial permit / death certificate.
7. Disability e.g. physically challenged: You must attach support document, letter explaining disability or other disadvantages and circumstance.
8. The needs for all beneficiaries will be considered on application and canvassing is prohibited.
9. Cheating if detected, will lead to automatic disqualification.
10. All the information provided will be cross-checked against information from other official public sources.
11. You are required to fill in all appropriate spaces as provided.
12. Bursary application forms **NOT** dully filed will **NOT** be accepted.
13. Students joining **FORM ONE MUST** provide calling /admission letter and a Leaving School Certificate from the immediate former Primary School signed and endorsed with an official stamp.

PART A: STUDENT'S PERSONAL DETAILS

FULL NAME _____
 First **Middle** **Last**

LOCATION _____ **SUB LOCATION** _____ **VILLAGE** _____

WARD _____ **POLLING STATION** _____

GENDER: MALE () **FEMALE** () **DATE OF BIRTH** _____

PART B: SECONDARY SCHOOL PARTICULARS

Name of School _____

National **County/Extra County** **Sub County** **Special**

Admission Number _____ **Form** _____ **Year** _____

Postal Address _____

For those students joining form I (Please attach joining calling/ admission letter)

Former Primary School Head Teacher's Remarks

Student/Pupil Conduct | Excellent V. Good Fair Poor

I declare that to the best of my knowledge the above information is true/or the applicant to attach a copy of certified school leaving certificate.

Name Signature Date & School Stamp

Address _____ Mobile No. _____

PART C: BURSARY REQUEST

Total Fee Payable per Year' Kshs' _____ Amount Able To Raise' Kshs' _____

Amount Requested 'Kshs' _____ (Attach the Fee Statement)

Have you ever benefited from the Constituency Bursary Fund?

Yes

No

If Yes, state the amount

Kshs.

PART D: PARENT'S / GUARDIAN'S DETAILS

Tick appropriately

Both Parents Alive _____

Partial Orphans _____

Total Orphans _____

Single Parent _____

Any Disability _____

(If one or both parents are deceased, attach death certificate(s) and evidence of any disability)

Name of Father _____ Occupation _____ Contact _____

Name of Mother _____ Occupation _____ Contact _____

Name of Guardian _____ Occupation _____ Contact _____

Physical/ Postal /Permanent Address _____

Attach support documents: e.g (death certificates, letter explaining disability or other disadvantage circumstance from Chief, Religious leader, prominent reference)

How many brothers and sisters do you have? _____ How many children does the guardian have? _____

How many are in Secondary school? _____ How many are in Post-Secondary Institutions? _____

PART E: INFORMATION ABOUT FAMILY FINANCIAL STATUS.

1. GROSS INCOME IN THE LAST 12 MONTHS (KSHS.)

	Father	Mother	Guardian/Sponsor	
Gross Income				

Gross income: (This means income from salary, business and farming)

2. APPLICANT’S SIBLINGS IN EDUCATIONAL INSTITUTIONS.

Siblings Name/Guardians Children	Name of Institution	Year of Study Class	Total Fees	Fees Paid	Outstanding Balance
Grand Total					

PART F: CERTIFICATION BY EITHER: CHIEF, ASSISTANT CHIEF OR RELIGIOUS LEADER

Comment on the status of the family/parent _____

I certify that the information given above is correct.

Name _____ Signature _____ Date _____

Position/Designation _____ Mobile No. _____

(Official Stamp) _____

PART G: DECLARATION/ VERIFICATION

1. STUDENT’S DECLARATION

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

Parent’s/Guardian’s Name Contact

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

3. SCHOOL VERIFICATION

For ongoing students

Student Academic Performance (Tick one option only)

Excellent V. Good Good Fair Poor

Position in class/for Term I Term II Term III

(Attach a Report Form)

Student Discipline (Tick one option only)

Excellent V. Good Good Fair Poor

Head teacher's brief comments on the student's level of need, discipline and academic performance

Head Teacher's Name _____ Signature _____

Mobile No. _____ Date _____ School Stamp _____

FOR OFFICIAL USE ONLY

PART H: CHECK LIST FOR OFFICIAL USE DURING SUBMISSION AT THE NG-CDF OFFICE

NO.	ITEM DESCRIPTION	STATUS (YES) (NO) (N/A)
1.	NAMES DULLY FILED AND ADMISSION NUMBER	
2.	COPY OF STUDENT REPORT FORM	
3.	COPY OF ADMISSION LETTER FOR STUDENTS JOINING FORM 1	
4.	COPY/IES OF PARENT/S ID AND VOTERS CARD	
5.	FEE STATEMENT	
6.	COPY/IES OF DEATH CERTIFICATES FOR ORPHANS	
7.	EVIDENCE OF DISABILITY	

Received By:

Name: _____ Designation: _____

Date: _____ Signature: _____

PART I: FOR OFFICIAL USE BY NG-CDF BURSARY SUB COMMITTEE

Recommended _____ Not Recommended _____ Differed _____

Justification _____

Amount Awarded 'Kshs' _____

Official's Name _____ Designation _____

Signature _____ Date _____