

PART A: STUDENT CURRENT PHYSICAL ADDRESS

REPUBLIC OF KENYA

COUNTY GOVERNMENTOF WEST POKOT P.O. Box 222-30600 KAPENGURIA

> Email: <u>info@westpokot.go.ke</u> <u>www.westpokot.go.ke</u>



BURSARY APPLICATION 2022/2023

68,554

FORM 2

36,000

32,554

DEPARTMENT OF EDUCATION AND TECHNICAL TRAINING

INSTRUCTIONS: Fill the **Application Form** in legible **CAPITAL** letters. NB: Submission of incomplete form may lead to disqualification. All duly filled forms should be delivered, on or before 30th December, 2022, at the ward Office for onward processing.

WEST POKOT COUNTY BURSARY APPLICATION FORM 2022/2023 FY

Sub countyPOKOT_CENTRAL						
ub- location PTIASIS Village CHESOKA						
PART B: STUDENT PERSONAL I						
1. Full Name (Official Name) AR!W						
2.Date of Birth 20. NOV, 20.013						
5. Name of Institution (Attach copy of	flatest Report form)KENYATTA	UNIVERSIT	Υ			
6. County where the institution is loca	tedNAIROBISub	o-County!	KASARAN	l		
7. Tel. No. of (a) Applicant	715202539 (b)Guardian/P	arent07	01265414			
PART C: FAMILY INFORMATIO	N (Attach copies of IDs)					
1. (a) Name of father:JULIUS ARIW	OMOI (b) Name of moth	er:CAROL	YNE ARI	WOWO!		
(c) Name of Guardian:	.N/A					
	d provide death certificate/ letter fro	m local area	Chief)			
2. Occupation of parents (i) Father	(ii) M	other				
3. Both parents alive: yesYES	No (if No attach death cert	ificate or lette	er from loc	cal chief)		
4. Single Parent. Yes	NoNO 5. If you are an orpha	an, who provi	des for you	ur school fe	ees?	
SelfGuardian	.SponsorAny other	(specify)			••••	
6. Persons with disability Nature of dis	sability:					
If registered with National Council of	People with Disability, provide regis	stration numb	er			
6. Have you benefitted from AN	Y bursaries/Scholarships before? Ye	S	NO	NO	(If	
YES state the source and amount (a) C	CDF(b) Ministry				
(c) County Government	(d) Any other					
PART D: APPLICANTS SIBLINGS						
N Siblings Names	Name of Institution	Year of	Total	Fees	Outstanding	
0		Study /	Annual	paid	Fees	
		Form	fees	10.00	Arrears	
1 ARIWOMOI JOY CHEPKEMEI	MOUNT KENYA UNIVERSITY	YEAR 1	42,600	42,600	0.00	

ST.JOSEPH GIRLS CHEPTERIT

2

3 4 5 ARIWOMOI MERCY CHEPORIOT

SCHOOL PERFORMANCE VERIFICATION
(Attach copy of latest Report form)
a). For Continuing Students Year of study2
Performance: Term ITerm IIITerm III
Students Discipline (tick one option only)
Excellent V. Good Good Fair Fair Poor
Executivity. Good Good Tail Tail Tool
PART E: STUDENT DECLARATION
IARIWOMOI EZRA KROP herein, declare to the best of my knowledge that the
information given is true.
Signature
PART F: PARENT/GUARDIAN DECLARATION
I declare that I have read this form or it has been read to me and I hereby confirm that the information given hereunder is true
to the best of my knowledge.
Lamme
Name JULIUS ARIWOMOI Signature Date 18 JANUARY,2023
PART G: VERIFICATION BY AREA CHIEF / ASSISTANT CHIEF
Name of chief /Ass. Chief
Comments on the status of the family/ Parent
I certify that the information given above is correct.
Signature
Signature
FOR OFFICIAL USE ONLY
TON OTTICKED COD OTTO
WARD BURSARY APPRAISAL COMMITTEE/PANEL
Score: Qualified Not Qualified (<i>Tick where Necessary</i>)
Bursary awarded Kshs:
Chairperson
Ward administrator (Secretary)SignStamp
KEY ATTACHMENTS TO THE FORM
Applicants MUST attach copies of the relevant documents including the following:
1. Students' transcript/ Report Form
2. Photocopy of parents' / guardians National Identity Card
3. Photocopy of students' National Identity Card (Mandatory for post school students)
4. Photocopy of birth certificate
5. Photocopy of the secondary/ college / university ID card
6. Parents death certificate / burial permit/chiefs letter (mandatory for orphans)
7. Current fees structure (mandatory for all applicants)

NOTE: "Successful applicants shall be notified"

8. Admission letters (mandatory for colleges and universities)