

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> www.westpokot.go.ke



BURSARY APPLICATION 2022/2023

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

3	tion				
Sub- location					
	•				
PART B: STUDENT PERSONAL I 1. Full Name (Official Name)					
2.Date of Birth3	.Gender 4.Adm/Reg No				
5. Name of Institution (Attach copy of	f latest Report form)				
6. County where the institution is loca	tedSub-	-County	• • • • • • • • • • • • • • • • • • • •		
7. Tel. No. of (a) Applicant	(b)Guardian/Pa	rent			
PART C: FAMILY INFORMATIO	N (Attach copies of IDs)				
1. (a) Name of father:	(b) Name of mother	er:			
	d provide death certificate/ letter from		•		
2. Occupation of parents (i) Father(ii) Mother(ii)					
3. Both parents alive: yes					
4. Single Parent. Yes	No5. If you are an orphan	n, who provi	des for you	r school f	ees?
SelfGuardian	.SponsorAny other ((specify)			••••
6. Persons with disability Nature of dis	sability:		• • • • • • • • • • • • • • • • • • • •		
If registered with National Council of	People with Disability, provide regist	tration numb	er		
	Y bursaries/Scholarships before? Yes				
YES state the source and amount (a) C	()	•			
(c) County Government	× / 2				
PART D: APPLICANTS SIBLINGS	S IN EDUCATIONAL INSTITUTION	ONS			
N Ciblings Names	Norma of Institution	Voorse	Total	Face	Outstanding
N Siblings Names	Name of Institution	Year of Study /	Total Annual	Fees paid	Outstanding Fees
o l		Form	fees	paiu	Arrears
1		2 0222	2000		111100115
2					
3					
4					
5					

SCHOOL PERFORMANCE VERIFICATION (Attach copy of latest Report form) a). For Continuing Students Year of study..... Performance: Term ITerm IIITerm III Students Discipline (tick one option only) Excellent V. Good Good Fair Fair Poor PART E: STUDENT DECLARATION I...... herein, declare to the best of my knowledge that the information given is true. Signature Date 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. Name Signature Date PART G: VERIFICATION BY AREA CHIEF / ASSISTANT CHIEF Comments on the status of the family/ Parent I certify that the information given above is correct. Signature DateRubber stamp..... FOR OFFICIAL USE ONLY WARD BURSARY APPRAISAL COMMITTEE/PANEL Qualified Not Qualified (*Tick where Necessary*) Score: Bursary awarded Kshs:Bursary not awarded (Reasons)...... 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)