



# Dadaab Constituency Bursary

P.O. BOX 732-90200, Dadaab Constituency. TEL: 0734-909- 303 & 0726242177. Email.cdfdadaab@ngcdf.go.ke

## PART A: INSTRUCTION

1. The constituency bursary scheme has limited available funds and is meant to support only the very needy cases.  
Persons who are able are not expected to apply.
2. It is an offense to give false information and once discovered will lead to disqualification.
3. Total and Partial orphans MUST present supporting documents from the area chief or Religious Leader.
4. All forms shall be uploaded to Dadaab Constituency Online CDF Application Portal not later than December 31, 2023.  
**NB: Any form returned after the stipulated period shall not be accepted whatsoever.**
5. Successful applicants will have the awarded bursary paid directly to university or college.
6. All information provided will be verified with the relevant Authority(s).
7. Applicants must upload the completed form along with supporting documents to the Dadaab Constituency CDF Portal.

## PART B: TO BE FILLED BY THE APPLICANT / PARENT / GUARDIAN

### i. Personal, Institutional and Other Details

NAME OF STUDENT (AS IT APPEARS IN ID/OFFICIAL DOCUMENTS): .....Suleiman Zeila.....

GENDER:.....male.....

DATE OF BIRTH:.....1998-10-21.....

ID number:.....36534131.....

NAME OF SCHOOL /COLLEGE / UNIVERSITY:.....Kenyatta University.....

ADMISSION/REGISTRATION NUMBER:.....1243fdg.....

CAMPUS/ BRANCH: (for tertiary institution and University).....Ruiru.....

FACULTY/ DEPARTMENT: (for tertiary institution and University).....Engineering.....

COURSE OF STUDY: (for tertiary institution and University).....M.Sc. Computer Science.....

MODE OF STUDY:.....regular.....

CLASS/GRADE/YEAR OF STUDY:.....1st Year..... COURSE DURATION:.....2.....

EXPECTED YEAR AND MONTH OF COMPLETION:.....2025.....

MOBILE/TELEPHONE NUMBER:.....0722363321.....

POLLING STATION:.....Labasigalle Borehole 5..... WARD:.....Labasigalle .....

LOCATION:.....Labasigalle.....

SUB LOCATION:.....Labasigalle .....

PHYSICAL ADDRESS:.....Royal Park, Langata.....

PERMANENT ADDRESS:.....Royal Park, Langata.....

INSTITUTION'S POSTAL ADDRESS:.....PO, BOX, 10100-9087.....

INSTITUTION'S TELEPHONE NUMBER:.....0722363321.....

AMOUNT APPLIED FOR (Kshs):.....20000.....

**(Attach support documents including letter of admission, fees structure and recommendations)**

**ii. FAMILY BACKGROUND**

Kindly indicate your family status:.....One Parent Dead.....

Number of siblings ( alive):.....7.....

Estimated Family income:.....1000000.....(annually Kshs.)

Estimated Family expense:.....800000.....(annually Kshs.)

Attach support documents eg- death certificate / a verification letter from area chief/sub chief

## a) Father

Full Name:.....Zeila Dubow.....

Address:.....16109.....

Telephone Number:.....0722363321.....

Occupation:.....Teacher.....

Type of employment:.....Retired.....

Main source of income:.....Teaching.....

## b) Mother

Full Name:.....Kaltuma Awer.....

Address:.....16109.....

Telephone Number:.....0722363321.....

Occupation:.....HouseWife.....

Type of employment:.....None.....

Main source of income:.....N/A.....

## c) Guardian

Full Name:.....Abdi Zeila.....

Address:.....16109.....

Telephone Number:.....0722363321.....

Occupation:.....Consultant.....

Type of employment:.....Contractual.....

Main source of income:.....Consultanting.....

d) Provide the names of siblings in school/ college/ university this year in the table below

S/No.	Name	Institution	Annual fees payable (Kshs.)
1	Nasri Zeila	university	200000

**iii. APPLICANT'S ADDITIONAL INFORMATION**

a). Why are you applying for bursary assistance?.....I am a needy person.....

b). Have you received any financial support / bursaries from NG-CDF in the past?.....Not Received.....

c). Have you received any financial support bursaries from other organizations in the past?.....Not Received.....

d). Do you suffer from any physical impairment (disability) ?.....No.....

e). Do you suffer from any chronic illness?.....No.....

f). Do your parents/guardians have any form of disability?.....No.....

g). Do your parents/guardians suffer from any chronic illness?.....No.....

**EDUCATION FUNDING HISTORY**

i). State the main source of funding for your education in the past as below:

In secondary school.....Parents.....

In college.....

In the university.....

ii). Indicate other sources of funding if any:

In secondary school.....

In college.....

In the university.....

## APPLICANT'S ACADEMIC PERFORMANCE

- a). What is your average academic performance?.....Excellent.....
- b). Have you been sent away from school?.....I have not been Sent Away.....
- c). Specify the number of weeks you stayed away from school.....0.....
- d). Annual fees as per fees structure Kshs.....400000.....
- e). Last semester's/Term's fee balance Kshs.....0.....
- f). This semester's/Term's fee balance Kshs.....220000.....
- g). Next semester's/Term's fee balance Kshs.....150000.....
- h). Loan from HELB ( where applicable).....0.....

## REFEREES

The student/parent/guardian should provide the names and telephone contacts of at least two referees who know the family well

- 1). Name.....Yahya Saadi Noor.....  
Address.....2345, Calgary Avenue, Calgary.....  
Telephone no.....+1234567890.....

- 2). Name.....Abdi Zeila.....  
Address.....16109.....  
Telephone no.....0722363321.....

## PART C: DECLARATIONS

### (1) STUDENT'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 and belief; I understand that any false information provided shall lead to my automatic disqualification by the committee.

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 and belief; I understand that any false information provided shall lead to disqualification of the student by the committee.

Parent's /Guardian's Name:..... Date..... Sign:.....

## PART D: VERIFICATIONS

Verified by:

a). Religious leader :

Name of religion:.....

Type of religion: Christian ( ) Muslim ( ) Hindu ( ) Any other ( ) (tick appropriately)

If other specify.....

Comment on the status of the family / parents of the applicant.....

.....

.....

I CERTIFY THAT THE INFORMATION GIVEN HEREIN IS TRUE

NAME:..... SIGNATURE..... DATE & OFFICIAL STAMP:.....

b). Chief / Assistant chief:

Name of the area chief / Assistant chief:.....

Location / sub location:.....

Comment on the status of the family / parents of the applicant.....

.....

.....

I CERTIFY THAT THE INFORMATION GIVEN HEREIN IS TRUE

SIGNATURE..... DATE & OFFICIAL STAMP:.....

## PART E: FOR OFFICIAL USE BY THE POLLING STATION VETTING COMMITTEE

This form was dully filled and signed: Yes ( ) No ( )

All support documents hav been attached: Yes ( ) No ( )

Recommended for Bursary: Yes ( ) No ( )

Reasons for non recommendation

:.....

.....

Polling station vetting committee members

Chairperson's Name:..... Date.....Signature:.....

Secretary's Name:..... Date.....Signature:.....

Member Name:..... Date..... Signature:.....

PART F: FOR OFFICIAL USE BY THE CONSTTTUENCY EDUCATION BURSARY SUB C

Recommended for Bursary award ( ) Not recommended for Bursary award ( )

Bursary awarded Kshs..... Reasons.....

Secretary's Name.....

Date..... Signature..... STAMP .....

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 (mandatory for orphans)
7. Current fees structure (mandatory for all applicants)
8. Admission letters (mandatory for colleges and universities)