



Serial Number

17181000001

KAKAMEGA COUNTY EDUCATION REVOLVING FUND UNDERGRADUATE LOAN APPEAL / REVIEW FORM

2017/2018

CAUTION

Any person or student who when filling a scholarship application form, knowingly makes a false statement whether orally or in writing relating to any matter affecting the request for a scholarship shall be guilty of an offence and shall be liable to a fine of not less than Kenya Shillings Thirty thousand (Ksh. 30,000) or to imprisonment for a term of not less than three years (Section 13 (3) of the Higher Education Loan Board Act (CAP 213A)).

Applicant's Personal Details

Full Name :	Shadrack Wabomba Wanyonyi	Loan Serial No. :	17181000001
Nat. ID. No. :	56534634	Institution Name :	Kenyatta University
Phone No. :	+254709666666	Email Address :	wsati@live.com
Loan Awarded :	KShs. 0.00	Bursary Awarded :	KShs. 0.00

Loan Appeal Details

Personal Details

If disabled, attach certification from National Council for Persons with Disability and School's Medical Officer
If orphaned, attached death certificate if you have not provided them before

Disability	Narration
None	
Parents' Marital Status	Mother's Death Cert. No.
Only Father Alive	64565464

Primary Education

If sponsored, attach letters from sponsor & school

School Type	Annual Fees	Sponsored	Sponsorship Reason
Public	KShs. 24,000	Yes	Poverty

Secondary Education

If sponsored, attach letters from sponsor & school

School Type	Annual Fees	Sponsored	Sponsorship Reason
Public	KShs. 0	No	Not Applicable

Declarations

Applicants Declaration

I declare that the information given herein is true to the best of my knowledge. I also understand that this is a loan that must be repaid.

Signature: Date:

Finance Officer / Financial Aid Officer

I confirm that the student herein is registered in this university and receives scholarship aid from the following organization(s).

1. 2.



Fee Balance: Campus:

Name of Officer: Signature: Tel:

Dean of Students Certification

The above named applicant and his/her parent/guardian appeared before me and made the solemn declaration that the information given herein is correct.

Name of Officer : Tel :

Stamp/Signature: Date :

Campus :

Additional Comments :

