

NYANDO CONSTITUENCY DEVELOPMENT FUND

BURSARY APPLICATION FORM

SECONDARY SCHOOLS/TERTIARY COLLEGES AND APPROVED/PUBLIC UNIVERSITIES GUIDELINES ON DISBURSEMENT OF BURSARIES

1. The allocation for EDUCATION BURSARY shall be 15% of the total NYANDO Constituency development fund (CDF) in any financial year.
2. Application MUST be bonafide residents of NYANDO CONSTIENCY.
3. Application forms can be obtained from the Chiefs, D.O's, [Continental House](#) in Nairobi and Nyando Constituency offices at Ahero Bible Centre.
4. Dully completed forms shall be taken to the Ahero Bible Center for vetting by the Constituency Bursary Committee headed by Mr. Bodo of Maseno University.
5. The Constituency Bursary Committee panel shall forward all the vetted application forms in order of MERIT/PRIORITY (MOST NEEDY CASES) to the NYANDO CONSTITUENCY DEVELOPMENT FUND COMMITTEE for final allocation and disbursement of funds.
6. The decision of the Nyando Constituency Development Fund Committee shall be final.
7. Application forms must be accompanied with photocopies of:
 - a. National/Institutional identity card
 - b. Academic certificates/Report card/KCPE/KCSE/Current transcripts
 - c. Admission Letter to the relevant institution.
 - d. Authenticated document showing Admission/registration number
8. Names of successful applicants shall be displayed for public viewing at the Chiefs, D.O's and CDF offices.
9. Bursary cheques will be released directly to the respective institutions BUT NOT to individuals.

PART A: STUDENTS PHYSICAL ADDRESS

Division _____ Location _____

Sub -Location _____ Ward _____

PART B: STUDENTS PERSONAL DETAILS

1. FULL NAME _____
Gender: __Male __Female
2. Postal Address _____
Telephone: _____
3. Date of Birth _____ Adm.No. _____ Class/Form _____
4. Name of Institution _____
5. Campus _____ Faculty _____ Year _____
6. Are you a regular/Privatey Sponsored/Parallel Student? _____
7. To be filled signed and stamped by the Institutional authority

Total Fees Required	Help or other Government Assistance	Paid/Able to pay	Outstanding Balance
Kshs:	Kshs:	Kshs:	Kshs:

8. STUDENT'S DECLARATION
I declare that to the best of my knowledge the information given here above is true

Student's Signature _____ Date _____

PART C: FAMILY INFORMATION

- 1. Name of Father/Mother/Guardian_____
- 2. Occupation/Profession_____
- 3. Both Parents Alive: Yes No
Single Parent: Yes No
Any Disability: Yes No
(Attached death certificate, Letter explaining disability)
- 4. If both parents are dead who pays for your education?
 Guardian Sponsor Any other
- 5. Have you ever benefited from Nyando CDF Bursary Allocation? Yes No
if Yes, Amount_____ Year_____

PARENTS/GUARDIAN'S DECLARATION

I declare that I have read this form/it 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_____

Parent's/Guardian's Signature_____ Date_____

PART D: CHIEF

Comment on the status of the family /parent/guardian and applicant

I certify that the information given above is correct.

Name_____ Signature_____

Date and Stamp_____

PART E: VERIFICATION BY INSTITUTION

I declare _____ is a student at this institution
to whom my comments are:

- 1. Level of need _____
- 2. Discipline _____
- 3. Academic performance _____

Head of Institution

Name _____

Signature _____

Date and Stamp: _____

PART F: FOR CDFC USE ONLY

Bursary awarded Kshs. _____

Bursary not awarded: _____

Official Stamps: _____

Chairman _____ Signature _____ Date _____

Secretary _____ Signature _____ Date _____

Treasurer _____ Signature _____ Date _____