# KENIA COLLEGE

**Empowering Students For a Better tomorrow**
**P.O.BOX 1222-10300**
**KERUGOYA**
**Cell: 0708771219/0411241276**
**Email: info@kuc.ac.ke**
**Web: www.kuc.ac.ke**


## SCHOLARSHIP APPLICATION FORM

**PART A: APPLICATNT'S PERSONAL DETAILS**

**Full Name of the Applicant**

First: _____Middle: _____Surname: _____

Gender: Male ☐ Female ☐ Date of Birth:

Postal Address: P.O. Box: _____Town/City: _____
Tel/Mobile No.: _____Sub-County: _____Ward: _____Location: _____Sub-Location
Physical Address: County_____ Sub-County_____
Ward: _____ Location: _____ Sub-Location: _____
_____

**PART B: APPLICATNT'S FAMILY INFORMATION**

**PARENT'S INFORMATION**

**Father's Full Name**

First: _____Middle: _____Surname: _____

ID No. _____ Living ☐ Deceased ☐
Physical Address: County_____ Sub-County_____
Ward: _____ Location: _____ Sub-Location: _____
Postal Address: P.O. Box: _____Town/City: _____
Tel/Mobile No.: _____
Source of Income: _____

**Mother's Full Name**

First: _____Middle: _____Surname: _____

ID No. _____ Living ☐ Deceased ☐
Physical Address: County_____ Sub-County_____
Ward: _____ Location: _____ Sub-Location: _____
Postal Address: P.O. Box: _____Town/City: _____
Tel/Mobile No.: _____
Source of Income: _____

Are your parents living together? Yes ☐ No ☐

**GUARDIAN INFORMATION (If not living with your parents)**

First: _____Middle: _____Surname: _____

ID No. _____ Living ☐ Deceased ☐
Physical Address: County_____ Sub-County_____

Ward: _____ Location: _____ Sub-Location: _____
Postal Address: P.O. Box: _____Town/City: _____
Tel/Mobile No.: _____
Source of Income: _____

**DETAILS OF FAMILY CIRCUMSTANCES**

| | Father | | Mother | | Guardian | |
|---|---|---|---|---|---|---|
| Name | | | | | | |
| Age of your parents/guardian | | | | | | |
| | YES | NO | YES | NO | YES | NO |
| Do any of your parents have any form of disability? | | | | | | |
| Are you living with both parents? | | | | | | |
| Are your parents/guardians employed? | | | | | | |
| Do your parents/guardians own any form of business? | | | | | | |
| Do your parents/guardians own land/plot? | | | | | | |
| Do your parents/guardians have any other assets or sources of income, including casual labour? | | | | | | |

**RECOMMENDATION BY A SPIRITUAL LEADER (PRIEST, PASTOR, ECT)**

I have read the information provided in this form and believe it to be truthful. Based on your knowledge of the family and/or inquiries I have made, I make the following recommendation regarding the needy circumstances and conduct of this application:

Name: _____ Mobile No: _____
ID No: _____ Position: _____ Organization: _____
Date: _____ Signature: _____ Stamp: _____

**RECOMMENDATION BY A LOCAL LEADER (CHIEF OR SUB-CHIEF)**

I have read the information provided in this form and believe it to be truthful. Based on my knowledge of the family and/or inquiries I have made, I make the following recommendation regarding the needy circumstances and conduct of this applicant:

Are they currently or have they been previously employed?

Name: _____Mobile No: _____

ID No: _____ Position: _____ Organization: _____

Date:_____ Signature: _____ Stamp:_____

**TERMS AND CONDITIONS**

1. Kenia College reserves the right to withdraw, at any time and from time to time, any scholarship awarded to a holder who does not attain the required pass mark in the various assessments conducted by the respective training institution.

2. A candidate in respect to whom a scholarship is withdrawn will not be eligible for the re-award of a scholarship.

3. Scholarship once awarded, unless withdrawn, will be tenable in respect to any student for the duration of the course only.

4. A scholarship awarded to an applicant is not transferable to any other candidate whatsoever.

5. Any applicant who gives false information or submits fake documents in support of the request for a scholarship shall be liable to disqualification and prosecution.

**Data Protection Clause and parents'/ guardian consent**

Kenia College is committed to protecting the privacy and security of personal information collected from students, parents, and guardians of Kenia College scholarship applicants. By providing your and your child's personal information to Kenia College, you consent to the collection, use, and disclosure of such information by the Foundation for the purposes of evaluating scholarship applications, fundraising for scholarships, administering scholarships and communication to sponsors. Our school will not disclose your child's personal information to any other third party without your consent, except as required by law. Our school will also take reasonable steps to protect your child's personal information from unauthorized access, use, or disclosure.

I therefore……. (Parent's/guardian's name) give consent to Kenia College to use information collected from the applicant for the purpose and use of the Foundation and in administration of the scholarship.

By signature below, I certify that to the best of my knowledge, the information provided in all parts of my application is accurate and complete.

Any falsification of information will lead to cancellation of scholarship awarded.

**Signature of Applicant _____ Date _____**