



# Machakos University

## OFFICE OF THE DEAN OF STUDENTS

### BURSARY APPLICATION FORM

YEAR BURSARY APPLIED FOR \_\_\_\_\_

#### **1.0 STUDENTS IDENTIFICATION**

1.1 STUDENT'S NAME: \_\_\_\_\_

1.2 COURSE: \_\_\_\_\_

1.3 ADMISSION NO.: \_\_\_\_\_

1.4 STUDENT'S HOME COUNTY: \_\_\_\_\_

1.5 DIVISION: \_\_\_\_\_

1.6 LOCATION: \_\_\_\_\_

1.7 SUB LOCATION: \_\_\_\_\_

1.8 VILLAGE: \_\_\_\_\_

1.9 NAME OF CHIEF: \_\_\_\_\_

1.10 POSTAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

#### **2.0 STUDENT'S FAMILY BACKGROUND INFORMATION**

2.1 IS FATHER ALIVE? YES/NO: \_\_\_\_\_

2.2 FATHER'S HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_

2.3 FATHER'S POSTAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

2.4 FATHER'S EMPLOYER: \_\_\_\_\_

2.5 FATHER'S JOB: \_\_\_\_\_

\_\_\_\_\_

2.6 FATHER'S APPROXIMATE INCOME PER MONTH: \_\_\_\_\_

- 2.7 IF UNEMPLOYED STATE HOW HE EARNS HIS LIVING: \_\_\_\_\_  
\_\_\_\_\_
- 2.8 IF IN BUSINESS DESCRIBE IT: \_\_\_\_\_  
\_\_\_\_\_
- 2.9 AVERAGE INCOME PER MONTH: \_\_\_\_\_  
\_\_\_\_\_
- 2.10 IF TOO OLD TO WORK, STATE AGE: \_\_\_\_\_  
\_\_\_\_\_
- 2.11 IF FATHER CRIPPLED, DESCRIBE NATURE OF DISABILITY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2.12 IF FATHER IS DEAD: \_\_\_\_\_  
NAME OF NEXT OF KIN: \_\_\_\_\_
- 2.13 NEXT OF KIN'S POSTAL ADDRESS: \_\_\_\_\_
- 2.14 NEXT OF KIN'S EMPLOYER: \_\_\_\_\_
- 2.15 NEXT OF KIN'S JOB: \_\_\_\_\_
- 2.16 NEXT OF KIN'S MONTHLY INCOME: \_\_\_\_\_  
\_\_\_\_\_
- 2.17 IS MOTHER ALIVE? YES/NO: \_\_\_\_\_
- 2.18 MOTHER'S POSTAL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_
- 2.19 MOTHER'S EMPLOYER: \_\_\_\_\_
- 2.20 MOTHER'S JOB: \_\_\_\_\_  
\_\_\_\_\_
- 2.21 MOTHER'S APPROXIMATE INCOME PER MONTH: \_\_\_\_\_  
\_\_\_\_\_
- 2.22 IF UNEMPLOYED STATE HOW SHE EARNS HER LIVING: \_\_\_\_\_  
\_\_\_\_\_
- 2.23 IS MOTHER AND FATHER SEPARATED? YES/NO: \_\_\_\_\_
- 2.24 WHO TAKES CARE OF YOU? \_\_\_\_\_
- i. MOTHER: \_\_\_\_\_
  - ii. FATHER : \_\_\_\_\_
  - iii. NEXT OF KIN: \_\_\_\_\_

2.25 HOW MANY WIVES DOES YOUR FATHER HAVE? \_\_\_\_\_

2.26 IF MORE THAN ONE WIFE, TO WHICH NUMBER DOES YOUR MOTHER BELONG?

i. 1<sup>ST</sup>

ii. 2<sup>ND</sup>

2.27 ARE YOU 1<sup>ST</sup>, 2<sup>ND</sup> OR 3<sup>RD</sup> BORN ETC? \_\_\_\_\_

2.28 WHAT IS THE FEES BALANCE FOR THIS YEAR? \_\_\_\_\_

2.29 WHAT IS THE BALANCE OF THE OTHER SCHOOL MONIES? \_\_\_\_\_

3.30 WHAT IS THE AMOUNT APPLIED FOR: \_\_\_\_\_

2.31 HOW MUCH MONEY IN FORM OF BURSARY /HELB LOAN WAS GIVEN TO YOU  
LAST YEAR/SEMESTER? HELB LOAN KSHS: \_\_\_\_\_

BURSARY KSHS: \_\_\_\_\_

2.32 HOW MUCH MONEY DID YOUR PARENT/GUARDIAN PAY? \_\_\_\_\_

**3.0 LIST OF BROTHERS & SISTERS IN SCHOOL. IF MORE USE A SEPARATE SHEET)**

3.1 NURSERY SCHOOL	NURSERY SCHOOL POSTAL ADDRESS	FEES PER YEAR
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**NAME**

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

3.2 PRIMARY SCHOOL	PRIMARY SCHOOL POSTAL ADDRESS	FEES PER YEAR
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**NAME**

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

3.3 SECONDARY SCHOOL	SECONDARY SCHOOL POSTAL ADDRESS	FEES PER YEAR
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**NAME**

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

3.4 COLLEGE/UNIVERSITY	POSTAL ADDRESS	FEES PER YEAR
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**NAME**

- (i) \_\_\_\_\_
- (ii) \_\_\_\_\_

3.5 WORKING BROTHERS AND SISTERS

3.6 BROTHER'S NAME                      POSTAL ADDRESS                      NATURE OF WORK

**NAME**

- (i) \_\_\_\_\_
- (ii) \_\_\_\_\_

3.6 SISTER'S NAME                      POSTAL ADDRESS                      NATURE OF WORK

**NAME**

- (i) \_\_\_\_\_
- (ii) \_\_\_\_\_