



**NATIONAL GOVERNMENT CONSTITUENCIES DEVELOPMENT FUND
BURSARY APPLICATION FORM FOR STUDENTS IN SECONDARY SCHOOLS,
COLLEGES AND UNIVERSITY
CENTRAL IMENTI CONSTITUENCY**

SERIAL NO: CENTRAL IMENTI/058/BUR/2025-26/.....

INSTRUCTIONS: Kindly provide your information in legible CAPITAL letters.

NB: Submission of incomplete form may lead to disqualification. ***(All dully filled forms to be delivered to the Assistant Chief Office at Your Respective Sub location on or before Friday 15th June 2026)***

PART A: TO BE FILLED BY THE APPLICANT/PARENT/GUARDIAN

I. Personal, Institutional and Other Details

Full Name of the Student (As it appears in ID/Official documents)	
Gender	
NEMIS No.	
ID Number/Passport No. (Where applicable)	
Name of School/College/University	
Adm No/Reg No.	
Campus/Branch (For Tertiary Institution and University)	
Faculty/Department	
Level of Education	Artisan(☐)Certificate (☐) Diploma(☐) Degree(☐) Masters(☐)PHD(☐)
Mode of Study	Regular (☐) Parallel (☐) Boarding (☐) Day (☐)
Class(Grade) /Year of Study	
Academic Year/Semester/Term	
Course Duration (Years)	
Expected Year and month of Completion	Month.....Year.....

Mobile No./Tel No.	
Physical Address	
Permanent Address	
Location	
Sub-location	
Ward	
Village	
Institution`s Postal Address	
Institution`s Tel No.	
Amount Applied for (Kshs)	
Amount Awarded(Official use only)	

Where applicable, please attach the relevant supportive documents including the following (Letters of Admission, Fee Structure, Recommendations)

II. FAMILY BACKGROUND (Tick where applicable)

Kindly indicate your family status:

Total Orphan	
Partial orphan	
Single parent	
Both parents alive	
Parents are PWDs	
Number of siblings (Alive)	
Estimated family income (Annually)	
Estimated family expenses (Annually)	

(Attach photocopies of death certificate(s) and verification letters from the area chief/assistant chief where applicable)

a) Father

Name..... Address.....

Tel No..... Occupation.....

Type of employment (Tick where applicable)

Permanent () Contractual () Casual ()

Retired () Self-employed () None ()

Main source of income.....

b) Mother

Name..... Address.....

Tel No..... Occupation.....

Type of employment (*Tick where applicable*)

Permanent () Contractual () Casual ()

Retired () Self-employed () None ()

Main source of income.....

c) Guardian (*Where applicable*)

Name..... Address.....

Tel No..... Occupation.....

Type of employment (*Tick where applicable*)

Permanent () Contractual () Casual ()

Retired () Self-employed () None ()

Main source of income.....

d) Indicate the names of siblings in school/college/university this year

Name	Secondary	College	University	Annual Fees Payable

III. APPLICANTS ADDITIONAL INFORMATION

- a. Why are you applying for a bursary?
.....
.....
- b. Have you received any financial support/bursaries from NG-CDF in the past?
Yes (☐) No (☐)
If yes, specify how much and when you last received the support.....
.....
- c. Have you received any financial support/bursaries from other organization in the past? Please provide details:.....
.....
.....
- d. Do you suffer from any physical impairment (disability)?
Yes (☐) No (☐)
- e. Do you have any other disability or any chronic illness? If yes, kindly describe and provide evidence
Yes (☐) No (☐)
- f. Does any of your parents/guardians have any form of disability?
Yes (☐)
No (☐)
If yes, describe the disability.....
.....
- g. Does any of your parents/guardians suffer from any other chronic disabling medical condition? Describe
Yes (☐)
No (☐)
If yes, describe the disability.....
.....

IV. EDUCATION FUNDING HISTORY

i) State the main source of funding for your education in the past (***Fill where applicable***)

- a) In secondary school.....
- b) In college.....
- c) In university.....

ii) Indicate other sources of funding if any

- a) In secondary school.....
- b) In college.....
- c) In university.....

PART B: APPLICANT'S ACADEMIC PERFORMANCE

a) What is your average academic performance?

- i. Excellent ()
- ii. Very Good ()
- iii. Good ()
- iv. Fair ()
- v. Poor ()

b) Have you been sent away from school? Yes.....no.....

If yes provide reasons for the absence

- c) Specify number of weeks you stayed away from school.....
- d) Annual fees (***As per fee structure***) Kshs.....
- e) Last semester's/ term fee balance.....
- f) This semester's/Term Fees.....
- g) Next semester's/Term Fees.....
- h) Loan from HELB (*where applicable*).....
- i) Type of **NGCDF** Bursary Sponsorship (Tick where applicable)- Partial()Full()
Scholarship()

j) **REFEREES**

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

1. Name.....
Address
Telephone.....
2. Name.....
Address
Telephone.....

STUDENT'S/PARENT'S/GUARDIAN'S DECLARATION

I hereby declare that the information provided herein is true to the best of my knowledge and belief, and I understand that any false information provided shall lead to my automatic disqualification by the committee

Applicant's Full Name.....

Signature.....

Date.....

I hereby declare that the information provided herein is true to the best of my knowledge and belief, and I understand that any false information provided shall lead to my automatic disqualification of the student

Guardian's/Parent's Full Name.....

Signature.....

Date.....

VERIFIED BY:

a) Religious leader

Full Name.....

Name of the Religion.....

Type of Religion:

Christian () Muslim () Hindu () Other () If other
specify.....

Recommendation:

Recommended ()

Not recommended ()

Remarks:.....
.....
.....

Signature.....

Official Stamp..... Date.....

b) Chief/Assistant Chief

Name of area Chief/Assistant Chief.....

Location/Sub-location.....

Recommendation:

Recommended ()

Not recommended ()

Justification:.....
.....
.....

Signature..... Date.....

Official Stamp.....

FOR OFFICIAL USE ONLY (To be filled by NG-CDF Bursary Committee)

The form was duly filled and signed Yes () No ()

All supportive documents have been attached Yes () No ()

Recommended for approval ()

Not recommended for approval ()

Reason for non-approval.....
.....
.....

Signed:

Chairman Date.....

Secretary..... Date.....

KEY ATTACHMENTS TO THE FORM

Applicants **MUST** attach copies of the relevant documents including the following:

1. Photocopy of Parents/Guardians National ID Card
2. Photocopy of Student's National ID Card (***Mandatory for post-school students***)
3. Photocopy of Birth Certificate
4. Photocopy of the Secondary/College/University ID Card
5. Parent(s) Death Certificate or Burial Permit (***For Orphans***)
6. Current fee structure (***Compulsory for all applicants***)
7. Any other relevant supportive document