



# COUNTY GOVERNMENT OF LAMU

LAMU COUNTY BURSARIES AND SCHOLARSHIPS BOARD

COUNTY GOVERNMENT OF LAMU

## UNIVERSITY AND COLLEGE BURSARY APPLICATION FORM

Financial Year 2020/2021



FORM - NO.....

WARD:.....

### INSTRUCTION

1. Fill this form with correct information as false information may lead to disqualification
2. This application should be accompanied with copies of: -
  - i) Identification card
  - ii) Institution ID
  - iii) Fees structure
  - iv) Admission letter/report form
  - (v) fees receipt (for continuing students) **must be attached.**

Submit dully filled form to your respective ward administrator's office latest by **30<sup>th</sup> October,2020.**

**NB:** Application in more than one (1) County Assembly Ward will lead to disqualification.

### PART''A'' STUDENT'S PERSONAL DETAILS

FULL NAME: .....Date of Birth: \_\_\_\_\_

Sex: Male ( )                      Female ( )

Adm. No: \_\_\_\_\_ year of study \_\_\_\_\_

Student's Tel No / Mobile No. ....

Student's Sign: ..... Date: .....

**PART 'B': INSTITUTION DETAILS**

(i) Tick Appropriate: 1st Year ( ) 2nd Year ( ) 3rd Year ( ) 4th Year ( )

(ii) Name of instituton.....

(iii) Course of Study: .....

(iv) Campus: .....

(v) Registration Number .....

(vi) Institution telephone No.....

**BANK DETAILS**

ACCOUNT NAME: \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_

BANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_

(failure to fill the accurate bank information will lead to delay of your bursary award)

**PART 'C': RESIDENCE:**

Home District..... Division: ..... Location: .....

Ward: ..... Constituency: .....

Sub – Location: ..... Village: .....

**PART D: DECLARATION**

1. I declare to the best of my knowledge that the information given is true and accurate

Parent's/guardian's Name .....

Parent's/guardian Signature.....Date.....

**PART E: WARD BURSARY COMMITTEE'S RECOMMENDATIONS**

1. Bursary approved ( ) Not approve ( )

Chairman's Name .....

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

Secretary's Name .....

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

Official stamp.....