



COUNTY GOVERNMENT OF LAMU

LAMU COUNTY BURSARIES AND SCHOLARSHIPS BOARD

COUNTY GOVERNMENT OF LAMU

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FINACIAL YEAR 2021/2022

SECONDARY SCHOOL NORMAL BURSARY APPLICATION FORM

FORM NO:.....

WARD:.....

INSTRUCTIONS

1. Fill this form with correct information as false information will lead to disqualification
2. This application should be accompanied with copies of: -
 - i) Birth Certificate
 - ii) Stamped KCPE online result slip
 - iii) Primary leaving certificate
 - iv) Parent/guardian Identification Card
 - v) Fees structure
 - vi) Admission/Calling letter (**MUST be attached**)
2. Send the filled form to your respective ward administrator's office

Submit dully filled form to the respective ward administrator's office latest by 15th JULY 2021

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

PART A: STUDENT'S DETAILS

1. Surname..... Middle Name..... First Name
2. Sex Male () Female ()
3. Date of birth.....
4. KCPE Index Number in full.....
5. Primary School Attended.....
6. Constituency..... County Assembly ward.....
7. Name of High school Admitted Admission.....
Form.....
8. School Account Name:..... Bank.....
School Account number:..... Branch.....
9. Category of School: Day () Boarding ()

PART B: FAMILY BACKGROUND

1. Who is responsible for your education?

2. Parent/guardian’s Name.....

Phone Contacts..... Email.....

3. Are there other children /siblings in school?

| S/N | NAME | INSTITUTION | CLASS /FORM |
|-----|------|-------------|-------------|
| | | | |
| | | | |
| | | | |

4. Have you benefited from other funds such as CDF, NGAAF, other donors) this year? YES () NO ()

If yes from whom?and how much did you receive Kshs.....

5. What balance do you have? Kshs.....

PART C: 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 approved()

2. Reasons for not approved.....

Chairman’s Name

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

Secretary’s Name

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

Official stamp.....

