



COUNTY GOVERNMENT OF MARSABIT

P.O. Box 384 – 60500, Marsabit

Department of Education, Skills Development, Youth and Sports



MARSABIT COUNTY EDUCATION FUND (MCEF)
KCPE SCHOLARSHIP APPLICATION FORM FOR FORM 1 2024

LOCALITY DETAILS;

SUB-COUNTY

WARD

VILLAGE UNIT

APPLICANT'S PERSONAL DETAILS

STUDENT NAME

DATE OF BIRTH (state year and place of birth)

ETHNICITY SEX: MALE() FEMALE ()

PARENTS BOTH ALIVE (), SINGLE PARENT (), ORPHAN ()

NAME OF FATHER/GUARDIAN..... I.D NO..... OCCUPATION.....

NAME OF MOTHER..... I.D NO..... OCCUPATION.....

PARENTS MOBILE NO.

DO YOU SUFFER FROM ANY DISABILITY? YES () NO ()

NATURE OF DISABILITY:

ACADEMIC INFORMATION

I. NAME OF PRIMARY SCHOOL ATTENDED.....

II. NAME OF SECONDARY SCHOOL ADMITTED.....

III. MARKS OBTAIN

IV. SCHOOL ACCOUNT NAME.....

V. SCHOOL ACCOUNT NUMBER.....

VI. BANK NAME..... BRANCH.....

VII. SCHOOL FEES PER YEAR.....

VIII. HEATEACHERS CONTACTS.....

(Please attach copies of parents ID, student result slips, Student birth certificate, admission letter & recommendation letter from head teacher)

FOR OFFICIAL USE

1. WARD COMMITTEE

NAME.....

SIGNATURE.....

Date.....

2. WARD ADMINISTRATOR

NAME.....

SIGNATURE.....

Date.....

3. APPROVE/REJECTED

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