



COUNTY GOVERNMENT OF MARSABIT

P.O. Box 384 – 60500, Marsabit

Department of Education, Skills Development, Youth and Sports



MARSABIT COUNTY EDUCATION FUND (MCEF)

2019/2020 BURSARY APPLICATION FORM

(TO BE FILLED BY 2019 PUBLIC SCHOOL CANDIDATES)

LOCALITY DETAILS:

SUB-COUNTY.....

WARD.....

VILLAGE UNIT.....

STUDENT STATUS

STUDENT NAME.....

DATE OF BIRTH(*state year and place of birth*).....

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:

SCHOOL DETAILS

I. NAME OF PRIMARY SCHOOL.....

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

III. FORM.....ADMISSION NUMBER.....

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 , admission letter & recommendation letter from head teacher and submit by 1st December 2019)

FOR OFFICIAL USE

1. WARD COMMITTEE

NAME.....

SIGNATURE.....

Date.....

2. WARD ADMINISTRATOR

NAME.....

SIGNATURE.....

Date.....

Sub county stamp

3. APPROVAL/REJECTION

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