

TOP GIRL COMMUNITY BASED ORGANISATION

EMAIL: scholarship@topgirlkenya.org

PHONE: +254 113 344 459 / +254 781 547 844

WEBSITE: <https://www.topgirlkenya.org>

SCHOLARSHIP APPLICATION FORM

INSTRUCTIONS

This application form should be completed in full and submitted by every student seeking for a scholarship from Top Girl CBO. Only a student from a vulnerable background, who has been admitted to a public secondary school and scored minimum marks of 350 in the KCPE national examinations should complete this form. Ensure that you complete all sections and attach all requested documents. Please note that any false information will lead to the automatic disqualification of your application at any point during the duration of the scholarship. Please fill in your KCPE results and attach a copy of your KCPE results slip and bring the original to the interview.

APPLICANT'S PERSONAL INFORMATION

Full name of applicant	
Constituency/location/sub-location	
Age	
Name of primary school where you sat for your KCPE	
KCPE index number	
Total marks scored	
Secondary school admitted to (please attach copy of admission letter to a public secondary school and bring the original to the interview)	

Passport Photo



Family status (both parents / single parent / orphan)	
Number of siblings	MALE FEMALE
Age of siblings	

A. PARENTS' / GUARDIAN'S INFORMATION

Names of parents / guardian	FATHER MOTHER GUARDIAN
Marital status (married / divorced / separation/Single Parent/Widower/Widowed.	
Parents alive / deceased (if deceased attach copy of death certificate and bring the original to the interview)	
National ID number	FATHER MOTHER GUARDIAN
Occupation	FATHER MOTHER GUARDIAN

Employment status	FATHER ----- MOTHER ----- GUARDIAN -----
Average monthly income	FATHER KSh ----- MOTHER KSh ----- GUARDIAN KSh -----
Any other source of income (including casual labour)	FATHER ----- MOTHER ----- GUARDIAN -----
Permanent physical home address (town estate, nearest public landmark by name and exact location to the residence, e.g. school, church, mosque, hospital)	
Is house owned, rented or owned by employer?	

GIVE BACK COMMITMENT

I commit to give back to my community through supporting a girl from my community to access higher education by paying school fees, volunteering at Top Girl CBO, contributing resources towards the CBO's activities once I complete my studies and get employment.

NAME:

SIGNATURE:

DATE (dd/mm/yyyy):

D. PARENT'S / GUARDIAN'S SIGNATURE AND ACKNOWLEDGEMENT OF INFORMATION

ACCURACY

To be signed by parent or legal guardian where parents are deceased. Any documents that can prove legal guardianship should also be attached.

Please sign below, accepting that you have read through this application in detail and can confirm the accuracy of the information provided.

(Tick where appropriate)

Relationship to applicant FATHER MOTHER GUARDIAN

NAME:

PHONE NO:

SIGNATURE:

DATE (dd/mm/yyyy):

E. RECOMMENDATIONS / REFERENCES

1. Confirmation and recommendation by primary school head teacher

I confirm that _____ was a pupil in my school. I also confirm that he/she scored _____ marks in KCPE and has been admitted to _____. I recommend that this pupil be supported by Top Girl CBO on the following grounds:

Personality / Conduct: _____

Family circumstances: _____

School performance: _____

NAME: _____

PHONE NO: _____

ID NO SIGNATURE AND SCHOOL STAMP: _____

DATE (dd/mm/yyyy): _____

2. Recommendation by a local Chief/Ass Chief

I have read the information provided in this form and believe it to be truthful. Based on my knowledge of the family and/or inquiries I have made, I make the following recommendation regarding the family circumstances and conduct of this applicant.

NAME: _____

PHONE NO: _____

ID NO: _____

POSITION: _____

SIGNATURE AND STAMP: _____

DATE (dd/mm/yyyy): _____

F. APPROVAL (FOR USE BY TOP GIRL CBO OFFICIALS ONLY)

Recommendation by panelists: _____

PANELIST 1 NAME: _____ SIGNATURE: _____

PANELIST 2 NAME: _____ SIGNATURE: _____

PANELIST 3 NAME: _____ SIGNATURE: _____

The beneficiary has been awarded a total of Ksh worth of scholarship for studies and upkeep for a period of 4 years.

NAME OF APPROVAL OFFICER: _____

POSITION: _____

SIGNATURE AND STAMP: _____

DATE (dd/mm/yyyy): _____