



REPUBLIC OF KENYA



HOMA BAY COUNTY

DEPARTMENT OF EDUCATION, HUMAN CAPITAL DEVELOPMENT AND VOCATIONAL TRAINING

HOMA BAY GOVERNOR'S



FINS TO SWIM
S C H O L A R S H I P

Scholarship

2024

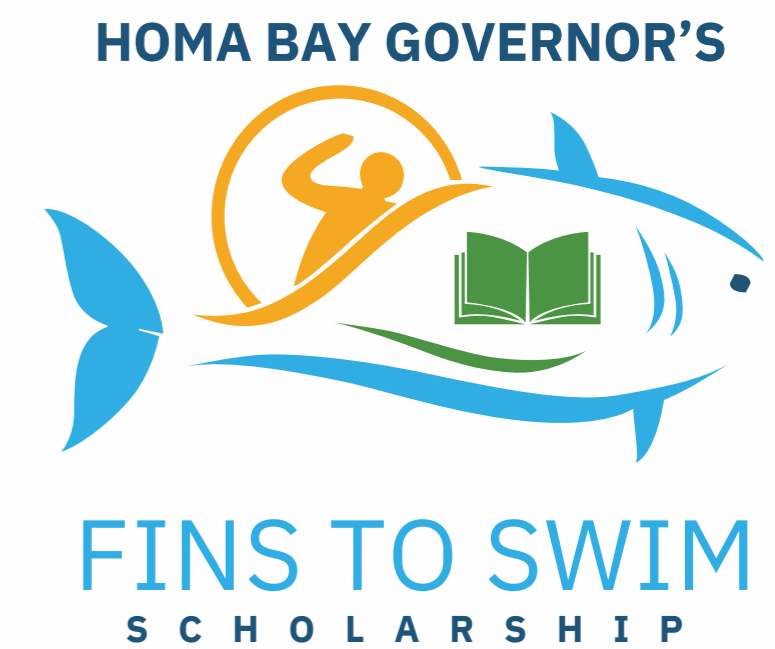
2024 SCHOLARSHIP APPLICATION FORM



HOMA BAY COUNTY

DEPARTMENT OF EDUCATION, HUMAN CAPITAL
DEVELOPMENT AND VOCATIONAL TRAINING

P.O BOX 706 – 40300 HOMA BAY



HOMA BAY COUNTY 2023 SCHOLARSHIP ANNOUNCEMENT

The County Government of Homa Bay through the Department of Education, Human Capital Development and Vocational Training wishes to bring to the attention of the general public that applications for Governor's scholarship is now open to candidates who sat for **KCPE in 2023, eligible to join Form one in 2024.**

This scholarship program was established in the year 2022 by H. E. Gladys Wanga with the specific objective of supporting outstanding and needy students from Homa Bay County.

The prescribed scholarship application form is attached below. The form can also be obtained from respective **Ward Offices** across the county or downloaded from the **Official County Government of Homa Bay Website** (<https://homabay.go.ke/>)

Eligible candidates **MUST** satisfy the following requirements:

- Be a resident of Homa Bay County
- Must have sat for KCPE 2023
- Must have attained 350 marks and above in KCPE
- Be resident of a ward from which he/she is applying from
- Is vulnerable and must demonstrate a need for financial assistance

Students from special groups like PWD are encouraged to apply and affirmative action shall be taken to ensure equity.

NOTE: Attach all relevant supporting documents e.g Copy of certified KCPE Result Slip, Death Certificate, Admission Letters, Fee Structures, Testimonials, Recommendation Letters etc

2024 SCHOLARSHIP APPLICATION FORM

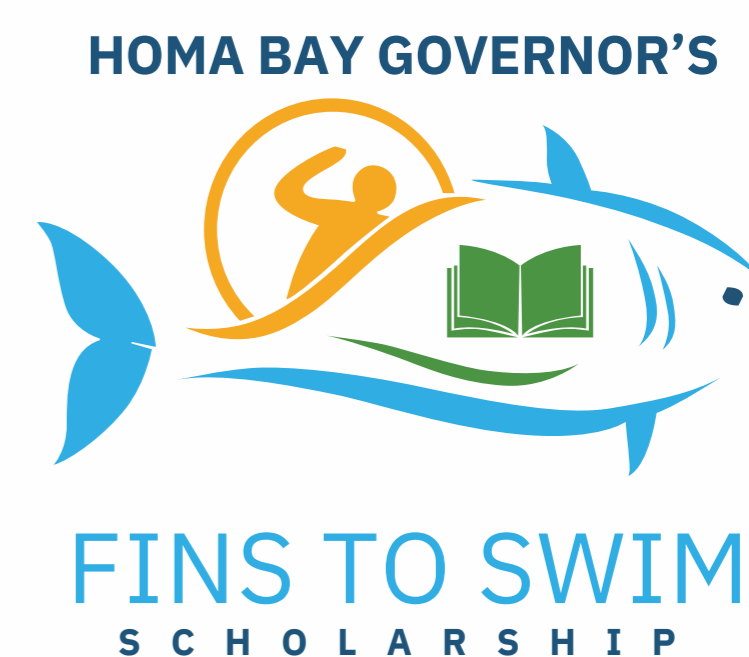
Form (AF-2)



HOMA BAY COUNTY

DEPARTMENT OF EDUCATION, HUMAN CAPITAL
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P.O BOX 706 – 40300 HOMA BAY



SCHOLARSHIP APPLICATION FORM (To be filled by new applicants)

INSTRUCTIONS/GUIDELINES

- This applicant form must be filled accurately and completely in **CAPITAL LET TERS**
- All incomplete or inaccurately filled forms will be automatically rejected
- Canvassing will lead to automatic disqualification
- The completion and submission of this form is not a guarantee for sponsorship
- Any false statements, omissions or forged documents will lead to automatic disqualification
- Only **2023 KCPE** candidates will be considered
- Every part of this form must be filled. Failure to do so makes this application form incomplete and therefore renders the applicant ineligible for the scholarship
- Kindly ensure that you attach the following documents to your duly filled application form
 - Certified copy of the result slip
 - Certified copy of calling letter **MUST** be provided when schools issue them
 - Certified Copy of Parent/Guardian ID
 - Death certificate or Burial permit (for Orphans)
 - Certified copy of birth certificate
 - Recommendations from Primary School Head Teacher, National Government Administration (Chief or Asst. Chief) and Religious leader, Please let the recommenders fill the attached commendation form.
 - Copies of **ALL DOCUMENTS** required must be provided by the applicant, Any applications without relevant documents will be rejected.

2024 SCHOLARSHIP APPLICATION FORM

Form (AF-2)

SECTION A

APPLICANT PERSONAL INFORMATION

1. Applicant's Name: _____
2. Gender: Male [] Female [] Date of Birth: _____ Place of Birth: _____
3. Birth Certificate No. _____ *(Attach copy of Birth Certificate)*
4. Sub-county: _____ Constituency _____ Location _____
Sub-location _____ Ward _____ Village _____
5. Permanent Address: _____ Telephone Number _____
6. Amount applied for in Kshs _____
7. Name of School _____
8. Form _____ Duration of Study _____
9. Date of Admission _____ Adm No. _____
10. Fees payable per year in Kshs. _____
11. Who is responsible for paying your school fees: _____
12. Any Disability: (Yes/No) _____ If Yes: Specify _____

(NB numbers 7,9 and 10 can be left blank if information not available by the time of submission)

FAMILY INFORMATION

1. Father's Name: _____ ID No. _____
2. Father's Status: Alive [] Deceased [] *(If deceased, please attach Death Certificate)*
3. Occupational Status: Employed [] Peasant Farmer [] Unemployed []
Others (specify) _____ *(If employed attach copy of latest pay slip)*
Other sources of income _____ total annual income per year _____
4. Telephone Contact _____
5. Mother's Name _____ ID No. _____
6. Mother's Status: Alive [] Deceased [] *(If deceased, please attach Death Certificate)*

2024 SCHOLARSHIP APPLICATION FORM

Form (AF-2)

7. Occupational Status: Employed [] Peasant Farmer [] Unemployed []

Others (specify) _____ (If employed attach copy of latest pay slip)

Other sources of income _____ total annual income per year _____

8. Telephone Contact _____

9. Provide details of brothers and sisters in school or college in the table below:

No.	Name	Year of Birth	Class/Year of Study	Fees paid per year	Sponsor
1					
2					
3					
4					
5					
6					
7					
8					

SECTION B

APPLICANT'S ACADEMIC RECORD (in chronological order):

No	Name of School/Institution	Year of Admission	Year of Completion	Final Grade (KCPE, KCSE etc)
1				
2				
3				
4				

CO-CURRICULUM ACTIVITIES (attach Certificates of participation):

a. Sports: _____

b. Clubs: _____

c. Other social activities: _____

2024 SCHOLARSHIP APPLICATION FORM

Form (AF-2)

ADDITIONAL REMARKS

In not more than 200 words please explain why you deserve this scholarship:

Signature of applicant: _____ Date: _____

SECTION C RECOMMENDATIONS

(A) AREA CHIEF/ASSISTANT CHIEF *(please attach a write up about the applicant if possible)*

I confirm/refute the information given by the applicant and I recommend/do not recommend the applicant for the award of scholarship.

NAME	SIGNATURE	DATE & OFFICIAL STAMP
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(B) RELIGIOUS LEADERS (Ordained Pastor, Bishop, Priest, Imam etc) *(please attach a write up about the applicant if possible)*

I declare that the above information is true/not true to the best of my knowledge and I am aware that giving false information will lead to automatic disqualification. I recommend/do not recommend the applicant for scholarship.

NAME	SIGNATURE	DATE & OFFICIAL STAMP
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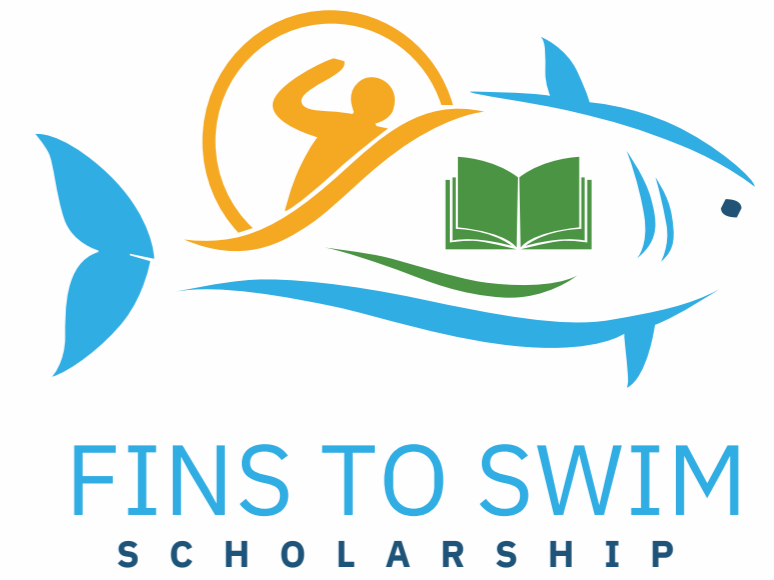
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DIRECTION TO HOME

Written description of directions to the home, listing nearest schools, hospitals, churches, as well as names of neighbouring homes

Draw a map showing directions to your home (clearly labelling the nearest schools, hospitals, churches as well as names of neighbouring homes)

2024 SCHOLARSHIP APPLICATION FORM

Form (AF-2)

(C) ACADEMIC REFEREES

Kindly provide letters of recommendation from the Academic referees e.g. former school principals. The recommendation letters should include the following information:

Name of Recommender: _____

Position: _____

Contact Address: _____

(D) WARD ADMINISTRATOR COMMENTS

I recommend /do not recommend the applicant for the award of scholarship. If not recommended, Give reasons _____

NAME OF APPROVER

WARD/DEPARTMENT

DATE

FOR OFFICIAL USE ONLY:

Are the applicant documents in order? Yes [] No []

Does the applicant qualify for award of scholarship? Yes [] No []

Amount allocated: _____

Remarks: _____

NAME

SIGNATURE

DATE & OFFICAL STAMP

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FINS TO SWIM
SCHOLARSHIP

SCHOLARSHIP RECOMMENDATION FORM

(To be filled by recommender)

This part must be completed by the relevant authorities indicated. Any false information will lead to disqualification.

Primary School Head Teacher:

Please report on the named applicant's performance, conduct, special interests and talents. Also explain why he/she should be considered for the Homa Bay County Governor's Scholarship Program.

How long have you known the candidate/family _____

My school has _____ pupils who sat for KCPE and in the most recent tests sat by the applicant before sitting for KCPE, this applicant's position was no. _____ overall and attained _____ marks out of 500.

Report on any special interests or talents the child may have e.g leadership, sports, Arts, Music etc: _____

Rate the candidate's financial ability: [] Very Rich [] Rich [] Middle Income [] Poor [] Very Poor []

I have reviewed the information given in this form and believe it to be truthful. The above student attended my school and based on my knowledge and /or inquiries, I affirm that he/she is needy /vulnerable. Please describe facts about his/her circumstances.

Postal Address: P.O. Box: _____ Town/City _____ Postal Code _____

Name: _____ Signature & Official stamp _____

Date: _____ Tel/Mobile Number _____

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SCHOLARSHIP RECOMMENDATION FORM

(To be filled by recommender)

National Government Administration (Chief or Ass. Chief)

How long have you known the candidate/family? _____

Rate the candidate's financial ability: [] Very Rich [] Rich [] Middle Income []

Poor [] Very Poor []

	Yes	No
Orphaned		
Parents/guardians are employed		
Parents/guardians		
Any additional information, explain:		
Reasons for recommendation		

I have reviewed the information given in this form and believe it to be truthful. The above named student is a resident of my Location/Sub-location. Based on my knowledge and/or inquiries, I affirm that he is needy/vulnerable.

Name: _____ Signature & Official stamp _____

Date: _____ Tel/Mobile Number _____

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(To be filled by recommender)

Religious Leader (Bishop, PAstor, Priest, Imam, etc)

How long have you known the candidate/family? _____

Rate the candidate's financial ability: [] Very Rich [] Rich [] Middle Income []
Poor [] Very Poor []

I have reviewed the information given in this form and believe it to be truthful.
Based on my knowledge and/or inquiries, I affirm that he is needy/vulnerable
based on the following facts about his/her circumstances.

Postal Address: P.O. Box: _____ Town/City _____ Postal Code _____

Name: _____ Signature & Official stamp _____

Date: _____ Tel/Mobile Number _____

