



Name _____ Admission Number _____

Application Guidelines

The Fund provides an opportunity for staff to help scholarship students, through financial contributions, meet some of their day-to-day needs (e.g. meals, accommodation, and stipend) while still pursuing their education.

Given the limited source of income, the fund will endeavor to make small grants in order to assist as many students as possible.

The Staff Giving committee will review applications on a quarterly basis; February, May, August and November.

Eligibility

1) Applicants must have been in the university for a least 1 year

In addition

1. Grants are only given on a per semester basis and reapplication for further grants is required but approval of the same is not guaranteed
2. The applicant agrees to the following if successful:
 - a) To participate in promotional material of the fund
 - b) That the Financial Aid office may provide their academic performance to the Staff Giving Committee
 - c) That the committee can contact the applicant's reference(s) for verification of the information provided

The application form must be returned together with:

- I. Letter requesting support including a Statement of how you have tried to raise funds in case the support requested from the fund is not 100%
- II. Duly filled application form
- III. Proof of application for HELB, Constituency Development Fund (CDF) or other sources for support

The Higher Education Loans Board awards various amounts of loans to university students with demonstrated financial need. Strathmore students are encouraged to apply for a HELB loan through www.helb.go.ke and submit a copy of the HELB application form to the Financial Aid Office.

STUDENT'S INFORMATION

Surname: _____ Other _____ Name: _____

National ID No: _____ PIN No: _____ Admission No: _____

Mobile Number: _____ SU Email Address: _____

Alternative Email _____

Postal Address: _____ Code: _____ Town: _____

Course: _____ Year: _____ Semester: _____ Major: _____

Mode of study: Fulltime _____ Evening Course _____

PARENTS' INFORMATION

Father	Mother
Pin No: _____	Pin No: _____
Is your father alive? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is your mother alive? Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, give date of death: _____ Attach certified copy of death certificate	If no, give date of death: _____ Attach certified copy of death certificate
How old is your father?	How old is your mother?
Name of employer: _____	Name of employer: _____
Address of employer: _____	Address of employer: _____
If retired give name and address of last employer.	If retired give name and address of last employer.
Year of retirement: _____	Year of retirement: _____



GUARDIAN’S INFORMATION

Name: _____

Postal Address: _____

Code: _____ Town: _____

Email Address: _____ Mobile Number: _____

Occupation: _____

Employer Name _____ Address: _____

Relationship to Applicant: _____

Family Income

	Father	Mother
Salary		
Business		
Farm		
Other		

Siblings Information

Name	Age	School/Employer	Fees PA	Class

If false information is given, this will automatically lead to disqualification.

Applicant’s Signature: _____ Date of application: _____

Staff Giving Fund Application Form



Strathmore
UNIVERSITY

Mentor Name: _____

Recommended

Not Recommended

Comment: _____

Signature _____ **Date** _____

For Official use

Staff Giving Committee

Awarded Amount _____ *Not Awarded*

Comment: _____

Signature: _____ *Date:* _____