

Name _____ Admission Number _____

Application Guidelines

The Student Assistant Program is a partial scholarship designed to give students with demonstrated financial need an opportunity to meet their educational expenses. Student's assistant may be placed in the library, helpdesks, computer labs and any other units offering student services.

Eligibility

- 1) Students who are unable to meet their tuition costs.
- 2) Students on partial scholarships who are unable to meet their percentage.
- 3) Students on loan who would wish to start early loan repayment.

In addition, you must:

- a) Be 18 years of age and above.
- b) Be a current student and have studied at Strathmore for a period of not less than one semester.
- c) Have a grade B and above or its equivalent in your course to date.
- d) Be in satisfactory academic standing - no pending units (repeats and retakes).
- e) Have demonstrated financial need.
- f) Be willing to abide by all the conditions of the work study program.
- g) Be available to work for the duration of at least one complete semester.
- h) Fill in the work study application form and attach the required documents.
- i) **Applicants must be recommended by their faculties/schools.**

The application form **must** be returned together with:

- (i) An application letter
- (ii) A curriculum vitae
- (iii) A copy of your transcripts
- (iv) A copy of your National ID
- (v) A copy of Pin no.

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.

Application for Work Study Form



Strathmore
UNIVERSITY

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. Year of retirement: _____	If retired give name and address of last employer. Year of retirement: _____

GUARDIAN'S INFORMATION

Name: _____
 Postal Address: _____ Code: _____ Town: _____
 Email Address: _____ Mobile Number: _____
 Occupation: _____
 Employer Name _____ Address: _____
 Relationship to Applicant: _____

Application for Student Assistant Program



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Family Income

	Father	Mother
Salary		
Business		
Farm		
Other		

Siblings Information

Name	Age	School/Employer	Fees PA	Class

Person who may be contacted in case of an emergency

Name: _____

Postal Address: _____ Code: _____ Town: _____

Email Address: _____ Mobile Number: _____

Relationship to Applicant: _____

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

Applicant's Signature: _____ Date of application: _____

School/Faculty

Recommended Not Recommended

Comment:

Signature _____ Date _____

Application for Student Assistant Program



FOR OFFICIAL USE ONLY:

Financial Aid Office

Documents submitted

- Application form duly filled and signed
- An application letter
- A copy of transcripts
- A copy of National ID
- A copy of PIN
- Curriculum vitae

Recommended Not Recommended

Signature _____ Date _____

If not recommended, give reason(s):

- Lack of supporting documents
 - No demonstrated need
 - Unavailability of student assistant opportunity
 - Average grade is below the requirement
 - Other
-

Department

Consider for: Fulltime Do not Consider
Part-time

Comment(s) _____

Signature _____ Date _____