

Rise to Shine Education Foundation (RTSEF) Scholarship Application Form - 2024

- The information provided in this form is intended to help the RTSEF Selection
 Committee understand the applicant's academic and financial position for the purpose
 of assessment for a scholarship award.
- Please take care to provide complete form and attachments, as incomplete or inaccurately filled forms will not be considered. Essays must be written. Follow directions on the form carefully.
- An application filled out by anyone other than the requesting student will be automatically disqualified.
- Filling this form does not guarantee a scholarship award.

Instructions:

Please complete the entire form. And attach all these documents:

- a. Photos of the applicant (student) and family attached on the form
- b. KCPE results slip, certified by your head teacher,
- c. Certificates of any death or burial of a parent or guardian,
- d. Latest three months' payslips for all parents and guardians,
- e. Bank or Income Statement of all parents and guardians, showing all business or other income,
- f. Student essays, and
- g. Include a letter from your local community leader, and at least one teacher or headmaster. These must clearly verify the child's school status and the family's status. These letters must be certified

PART A: PERSONAL DATA

Full Name of Applicant:		
First/Baptismal: Gender:		Surname/ Family Name:
Postal Address: P.O. Box: Tel/Mobile No:	Tow <mark>n/City:</mark> Alternative <mark>Mobile:</mark>	Postal Code: Neighbor's Mobile:
Physical Address: (Put in informa	tion where you <mark>r p</mark> er <mark>ma</mark> n	ent home is)
County:Sub-County: _	Ward:	
Location: Sub-Loc	ation:	4
√.	PART B: ACADEMIC INFO	RMATION
Name of Primary School Attende	d:	
Physical Address: County:	Sub-County:	Ward:
Location: Sub-Loc	ation:	
KCPE Index No:	KCPE Marks:	



ar sat for KCPE:	Have you attem	npted KCPE in previous years? Yes/No
yes, how many time	s and why?	
Please indicate the	KCPE scores attain	ed f <mark>or</mark> previous years:
		STUDENT ESSAYS:
 Why do you What extract What roles What caree What services 	like school? What s curricular activities of do you have in school r do you hope for? V se or volunteer activ	write the following essays: ubjects do you love most and why? are you involved in (i.e., music, sports, clubs)? ol, or in community leadership? Why? ities do you do in school? In the community? with NGOs? I in school or in the community?
Father's Full Name		NT'S FAMILY & PARENTS' INFORMATION
ID No.: Li	ving/Deceased	[If deceased, attach copy of Death/Burial Certificate]
Physical Address: (County:	Subcounty:
Ward:L	ocation:	Sub-Locat <mark>ion:</mark>
Tel/Mobile No.:		
Source of Income:		
Mother's Full Name	9:	
ID No.: Li	ving/Deceased	[If deceased, attach copy of Death/Burial Certificate]
Physical Address:	County:	Su <mark>bcount</mark> y:
Ward:	Location:	Sub-Location:
Tel/Mobile No.:		
Source of Income:		
Who do you stay w circumstances whe		an? Clearly write their full names, and explain the
Guardian's Full Na	ne:	



ID No.:	Living/Deceased	[If deceased, attach copy of Death/Burial Certificate]
Physical Add	Iress: County:	Subcounty:
Ward:	Location: _	Sub-Location:
Tel/Mobile N	o.:	
Source of Inc	come:	
	s/guardians employed? Giv	e details of all their jobs:
		? Describe the nature of the business:
Why should you	be considered for this scho	olarship? (Fully <mark>explain a</mark> ll your <mark>circ</mark> umstances):
List any other so	cholarships or financial aid	you currently receive or you apply for:



SIBLING INFORMATION

List all your brothers and sisters starting with the eldest and state what each is doing. (If working, describe the nature of their job. If in university, state it; If in school, state the form or class; If in training describe it; If a sister is married, show the occupation of the husband. If a brother is married, show the occupation of the wife.)

	Name	Age	School/Employer	Class/Position in Employment
1				
2				
3				
4				
5				
6				
7	,			77.
8				
9			and the same of th	
10				
11			4 / /	

PART D: SIGNATURE & CERTIFICATION:

Please follow the instructions below, and attach all documentation to this application so it is complete. We all certify that the information included is true and accurate to the best of my knowledge. We understand that false statements will disqualify us. We understand submitting this form does not guarantee that the request will be approved. Applicants & parents/guardians give permission to teachers, school, community leaders and others to freely give information.

Applicant (student) Signature:	Date:
Parent/Guardian Signature:	Date:
Parent/Guardian Signature:	Date:

Please send the filled-up form on or before 24th Dec<mark>em</mark>ber 2023 or it is too late to be considered for a scholarship.

If you have any questions, please reach out to the foundation for assistance via 0703623843.

Thank you very much for fully filling the form!

RTSEF - Changing lives by Educating One at a time