

8. Are you currently receiving or have another bursary from any other source?

YES

NO

9. If yes please state

10. State whether you have benefited in the past CDF bursary YES NO

11. If yes to that question, please state the following

Amount..... Year.....

D. BACKGROUND INFORMATION

Full name of parent / guardian

Relationship of the parent / guardian indicated to the applicant

(State whether you are the Father, Mother, Uncle, Aunt, Grandmother / Father, e.t.c.)

Occupation Mobile No.....

For applicants below 25 (twenty five) years, kindly indicate your status (tick appropriately)

Both parents alive

Both parents Dead

One Parent Dead

Any disability

(Specify).....

E. APPLICANT DECLARATION

I declare that the information given is true to the best of my knowledge and any wrong information submitted is criminal offence.

Name Signature

PARENT / GUARDIAN

I declare that I have read this form / this form has been read to me and I hereby confirm that the information given herein is true to the best of my knowledge.

Name ID NO.....

Signature Date.....

F. CERTIFICATION CHIEF

I certify that the applicant is a resident of my location / Sub-location and that I have checked the information given herein to be the true to the best of my knowledge.

Name Signature & Stamp.....

Mobile No.. Date.....

KALOLENI NG – CDF OFFICIAL USE ONLY

HOW MUCH APPROVED FOR DISBURSMENT

DATE OF APPROVAL.....

NAME Sign.....

Date..... Official Stamp.....