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SCHOLARSHIP APPLICATION FORM– GRADE 9

Important Instructions

This form must be completed IN FULL by learners from needy families currently in public Junior Schools (Grade 9) preparing for the Kenya Junior School Education Assessment (KJSEA). Learners from private schools MUST provide proof of sponsorship.

Attach all required documents and submit the complete application to Empower the World Foundation office at Lancaster Plaza, 1st Floor, Room B23 – Naivasha on or before 1st November.

Providing false or misleading information will lead to automatic disqualification.

PART 1: APPLICANT INFORMATION

Full Name: _____

Gender: ☐ Male ☐ Female Date of Birth: _____

Phone: _____ Alternative: _____

County: _____ Sub-county: _____

Ward: _____ Village/Estate: _____

Nearest Landmark or School: _____

Do you have a disability? ☐ Yes ☐ No If yes, specify: _____

PART 2: FAMILY INFORMATION

Father's Name: _____ ☐ Living ☐ Deceased

Occupation/Source of Income: _____

Mobile: _____ ID No.: _____

Mother's Name: _____ ☐ Living ☐ Deceased

Occupation/Source of Income: _____

Mobile: _____ ID No.: _____

Guardian(if applicable): _____

Relationship to Applicant: _____

Occupation: _____ Mobile: _____

Family Circumstances

Indicator	Yes	No	Remarks
Any parent/guardian with disability	☐	☐	
Parents/guardians employed	☐	☐	
The family owns a small business	☐	☐	
The family owns land or a plot	☐	☐	
Family affected by drought/flood/fire/conflict	☐	☐	

Sibling Information

	Name	Age	School/employer (indicate the name of the school, whether private or public)	Single/ married
1				
2				
3				
4				
5				
6				
7				

PART 3: ACADEMIC INFORMATION

Name of School: _____

KJSEA Ass No. : _____ KJSEA Grade: _____

Favorite Subject(s): _____

Career Aspiration: _____

PART 4: MY STORY AND MY DREAM

1. Tell us about your background and the challenges you face:(please attach a separate sheet)

2. What is your dream for the future, and how will this scholarship help you achieve it?:(please attach a separate sheet)

PART 5: FINANCIAL DECLARATION (To be completed by Parent/Guardian)

1. Have you been out of school due to lack of school fees?

YES

☐

NO

☐

2. Explain briefly why your family cannot afford school fees:

Family contribution per term (**mandatory**): Kes. _____

Parent/Guardian Name: _____

Signature: _____ Date: _____

Mobile No.: _____ ID No.: _____

PART 6: RECOMMENDATIONS

1. School Principal's / Headteacher's Recommendation

I confirm that _____ is a Grade 9 learner at
_____ Junior School.

The learner has demonstrated the following qualities:

- Academic performance: _____
- Discipline and character: _____
- Leadership and participation: _____
- Talents/interests: _____

Most Recent Assessment: Mean Grade: _____ KJSEA: _____

Principal's Name: _____ Signature: _____

School Name: _____ Date: _____

Phone: _____ Email: _____

Official Stamp: _____

2. Chief / Assistant Chief Recommendation

I, _____, Chief/Assistant Chief of
_____, confirm I know this family.

Household Status: ☐ Vulnerable ☐ Extremely Poor ☐ Single Parent ☐ Orphan

☐ Guardian Care ☐ Other: _____

Employment Status: Father ☐ Employed ☐ Unemployed Mother: ☐ Employed ☐ Unemployed

Guardian: ☐ Employed ☐ Unemployed

Comments/Observations:

Name: _____ Signature: _____ Date: _____

Location: _____ Mobile No.: _____

Official Stamp: _____

3. Religious Leader's Recommendation (Pastor / Priest / Imam / Elder)

I, _____ serving as a (Pastor / Priest / Imam / Elder)
at _____, have known
_____ and their family for _____ years.

Overall Recommendation: ☐ Strongly Recommend ☐ Recommend ☐ Recommend with
Reservations ☐ Do Not Recommend

Comments: _____

Religious Leader's Name: _____ Signature: _____

Date: _____

Organization: _____ Position: _____

Mobile No.: _____ Official Stamp: _____

PART 7: CHECKLIST, DECLARATION & CONSENT

Checklist:

- ☐ Form filled completely
- ☐ Passport photo attached
- ☐ All required copies attached
- ☐ All recommendation sections signed and stamped

Applicant Declaration

I declare that all information provided in this form is true to the best of my knowledge. I understand that any false information will lead to disqualification.

Applicant Name: _____ Signature: _____

_____ Date: _____

Data Protection and Consent

Empower the World Foundation is committed to protecting your personal information in accordance with the Kenya Data Protection Act, 2019. All information provided will be used solely for scholarship assessment, verification, and program support. Your data will not be shared with unauthorized persons or institutions.

By signing below, I voluntarily consent to the collection, processing, and secure storage of my personal data.

Applicant Name: _____

Parent/Guardian Name: _____ Signature: _____ Date: _____