THE COUNTY GOVERNMENT OF MERU

DEPARTMENT OF EDUCATION, SCIENCE, CULTURE AND ARTS

Email: education@meru.go.ke
When replying please quote

County Government of Meru
P.O. Box 120-60200
MERU

RETENTION ENHANCEMENT FUND FY 2023/2024
APPLICATION FORM

SERIAL NO…….YEAR ……

INSTRUCTIONS:

1. **GIVE CORRECT INFORMATION ONLY**
2. **INCOMPLETE FORMS WILL NOT BE ACCEPTED**
3. **DULY FILLED APPLICATION FORM SHOULD BE RETURNED TO THE WARD ADMINISTRATOR'S OFFICE ON OR BEFORE 04th DECEMBER 2023.**
4. **DO NOT ACCEPT ANY OTHER APPLICATION FORM APART FROM THE OFFICIAL ONE WITH A WATERMARK**
5. **APPLICATION SHOULD BE DONE IN ONLY ONE WARD TO AVOID DISQUALIFICATION**

APPLICATION DETAILS

DATE……MONTH……YEAR……. WARD……

SUB-COUNTY/CONSTITUENCY……. LOCATION……

SUB-LOCATION…… VILLAGE/ESTATE……..

(Note Carefully: Attach a copy/ copies of Parents/Guardian's ID Card)

PART A: STUDENT AND SCHOOL DETAILS

Surname …… Middle …….. Others…….

SEX Male [ ] Female [ ]

Name of the School/Vocational Training Centre/College/University……….

……

REG. NO /ADM. No……**Year of Study/FORM ……**……

(Note Carefully: The institution name should appear as it is in the fees PRO-FORMA)

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SCHOOL LOCATION DETAILS

REGION (e.g. Nairobi)……..County……. Sub-County……

Category of Secondary School: National [ ] Extra County [ ] County [ ] Day school [ ]

Fees Balance Ksh. …… ***(Include previous balance for continuing students)***

Give the details of the institution's Principal/Finance Officer/Bursar/Manager

a) **PRINCIPAL/FINANCE OFFICER/BURSAR NAME……..**
b) **SCHOOL MOBILE NUMBER……..**
c) **SCHOOL EMAIL ADDRESS……**

NOTES

Please Attach a copy of the latest fees structure/fees statement

PART B: FAMILY/GUARDIAN INFORMATION

Parent/Guardian's name……

Occupation / Profession……**Mobile No**……

Tick Appropriately:

Both my parents are alive [……] Single parent [……..] Orphan [……..]
(Attach copy of death certificate/letter from the Chief/Asst. Chief if orphaned)

Briefly explain the reason for your inability to pay school fees.

……

……

1. **STUDENT'S DECLARATION.**

I declare that to the best of my knowledge the information given herein is true.

Student's signature…….. Date……

2. **PARENT'S / GUARDIAN'S DECLARATION**

I declare that I have read this form/ has been read to me and I hereby confirm that the

Information given herein is true to the best of my knowledge.

Parent's/ Guardian's Name……Signature……

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PART D: AREA CHIEF/SUB-CHIEF

Comment on the financial status of the family…….

……

I declare that the information given herein is correct to the best of my knowledge

Name ……..……Signature……..stamp …….

PART E: WARD ADMINISTRATOR

Comments…….....

Name……Signature…… Date……

(Official Stamp)

FOR OFFICIAL USE ONLY

Retention Enhancement Fund Awarded…. [ ] Not awarded….. [ ]

……

Secretary's Name……Signature……. Date……

Official Stamp

COUNTY GOVERNMENT OF MERU